



# OFFICE OF GROUP BENEFITS

## ACT 322 & ACT 992 RETIREE PREMIUM RATES

Effective August 1, 2012

	<b>PPO</b>			<b>HMO</b>			<b>CDHP with HSA</b>			<b>Region 9 (10 northeast LA parishes) Medical Home HMO</b>			<b>Regions 6, 7, 8 &amp; 9 (Baton Rouge, Alexandria, Shreveport &amp; Monroe) Regional HMO</b>		
	<i>Administered by OGB</i>			<i>Administered by Blue Cross</i>			<i>Administered by UnitedHealthcare</i>			<i>Insured by Vantage Health Plan</i>			<i>Insured by Vantage Health Plan</i>		
	State Share	Employee Share	Total	State Share	Employee Share	Total	State Share	Employee Share	Total	State Share	Employee Share	Total	State Share	Employee Share	Total
<b><u>ACTIVE EMPLOYEE</u></b>															
SINGLE	431.94	143.98	575.92	408.10	136.02	544.12	335.32	111.76	447.08	467.48	141.60	609.08	424.64	128.64	553.28
WITH SPOUSE	755.62	467.66	1223.28	713.82	441.74	1155.56	586.56	363.00	949.56	833.78	459.94	1293.72	748.34	409.98	1158.32
WITH CHILDREN	495.18	207.22	702.40	467.82	195.74	663.56	384.50	160.94	545.44	539.18	203.90	743.08	488.02	183.70	671.72
FAMILY	789.06	501.10	1290.16	745.38	473.30	1218.68	612.48	388.92	1001.40	871.56	492.80	1364.36	781.74	439.02	1220.76
<b><u>RETIREE WITHOUT MEDICARE &amp; RE-EMPLOYED RETIREE</u></b>															
SINGLE	431.94	639.54	1071.48	408.10	607.38	1015.48	N/A	N/A	N/A	467.48	665.40	1132.88	424.64	591.56	1016.20
WITH SPOUSE	755.62	1136.42	1892.04	713.82	1079.26	1793.08	N/A	N/A	N/A	833.78	1167.06	2000.84	748.34	1034.90	1783.24
WITH CHILDREN	495.18	698.30	1193.48	467.82	663.38	1131.20	N/A	N/A	N/A	539.18	722.82	1262.00	488.02	642.30	1130.32
FAMILY	789.06	1093.78	1882.84	745.38	1039.10	1784.48	N/A	N/A	N/A	871.56	1119.52	1991.08	781.74	992.90	1774.64
<b><u>RETIREE WITH 1 MEDICARE</u></b>															
SINGLE	261.34	87.10	348.44	251.98	83.98	335.96	N/A	N/A	N/A	282.82	85.66	368.48	261.48	79.20	340.68
WITH SPOUSE	755.62	531.78	1287.40	713.82	513.98	1227.80	N/A	N/A	N/A	833.78	527.50	1361.28	748.34	469.74	1218.08
WITH CHILDREN	452.32	150.76	603.08	433.44	144.48	577.92	N/A	N/A	N/A	489.46	148.26	637.72	444.08	134.52	578.60
FAMILY	789.06	926.26	1715.32	745.38	888.90	1634.28	N/A	N/A	N/A	871.56	942.28	1813.84	781.74	836.26	1618.00
<b><u>RETIREE WITH 2 MEDICARE</u></b>															
WITH SPOUSE	469.74	156.58	626.32	451.66	150.54	602.20	N/A	N/A	N/A	508.16	153.92	662.08	460.60	139.52	600.12
FAMILY	581.62	193.86	775.48	559.20	186.40	745.60	N/A	N/A	N/A	629.24	190.60	819.84	567.58	171.94	739.52
<b><u>C.O.B.R.A.</u></b>															
SINGLE	0.00	631.68	631.68	0.00	596.78	596.78	0.00	490.32	490.32	0.00	621.28	621.28	0.00	564.04	564.04
WITH SPOUSE	0.00	1341.68	1341.68	0.00	1267.38	1267.38	0.00	1041.46	1041.46	0.00	1319.88	1319.88	0.00	1181.46	1181.46
WITH CHILDREN	0.00	770.40	770.40	0.00	727.80	727.80	0.00	598.20	598.20	0.00	757.72	757.72	0.00	684.62	684.62
FAMILY	0.00	1415.04	1415.04	0.00	1336.62	1336.62	0.00	1098.30	1098.30	0.00	1391.76	1391.76	0.00	1244.98	1244.98
<b><u>DISABILITY C.O.B.R.A.</u></b>															
SINGLE	0.00	928.92	928.92	0.00	877.62	877.62	0.00	721.08	721.08	0.00	916.08	916.08	0.00	824.58	824.58
WITH SPOUSE	0.00	1973.04	1973.04	0.00	1863.78	1863.78	0.00	1531.56	1531.56	0.00	1940.56	1940.56	0.00	1729.96	1729.96
WITH CHILDREN	0.00	1132.92	1132.92	0.00	1070.28	1070.28	0.00	879.72	879.72	0.00	1114.00	1114.00	0.00	999.52	999.52
FAMILY	0.00	2080.92	2080.92	0.00	1965.60	1965.60	0.00	1615.14	1615.14	0.00	2046.52	2046.52	0.00	1823.62	1823.62

NOTE: 1) The breakdown between State Share and Employee Share may not be accurate for certain School Board employees due to local funding that affects agency funding that affects agency contributions. Total premium columns are correct for all agencies.  
 2) All plan members who retired on or after July 1, 1997, must have Medicare Parts A and B to qualify for reduced premium rates.

Approved by: *Brenda St. Romain*

6/8/2012