

## OFFICE OF GROUP BENEFITS OFFICIAL SCHEDULE OF PREMIUM RATES (56% Participation Rate)

Effective for January and February, 2015

| *****                        | PPO Administered by Blue Cross |                   |         | HMO Administered by Blue Cross |                   |          | CDHP with HSA Administered by Blue Cross |                   |            | Vantage Medical Home HMO Insured by Vantage Health Plan |                         |          |
|------------------------------|--------------------------------|-------------------|---------|--------------------------------|-------------------|----------|--|-------------------|------------|---|-------------------------|----------|
|                              | State<br>Share                 | Employee<br>Share | Total   | State<br>Share                 | Employee<br>Share | Total    | State<br>Share                           | Employee<br>Share | Total      | State<br>Share  | Employee<br>Share       | Total    |
| CTIVE EMPLOYEE               | onaro                          | o.i.a.o           |         |                                |                   |          |  |                   |            |   |                         |          |
| SINGLE                       | _                              | _                 | _       | _                              | _                 | _        | _  | _                 | _          | _   | _                       | _        |
| WITH SPOUSE                  | _                              | _                 | _       | _                              | _                 | _        | _  | _                 | _          | _   | _                       | _        |
| WITH CHILDREN                | _                              | _                 | _       | _                              | _                 | _        | -  | _                 | _          | _   | _                       | _        |
| FAMILY                       | _                              | _                 | _       | _                              | _                 | _        | _  |                   | _          | _   | _                       |          |
| RETIREE WITHOUT MEDIC        | ARE & RE-E                     | MPLOYED R         | ETIREE  |                                |                   |          |  |                   |            |   |                         |          |
| SINGLE                       | 618.89                         | 486.26            | 1105.15 | 586.55                         | 460.85            | 1047.40  | N/A                                      | N/A               | N/A        | 586.54  | 460.86                  | 1047.40  |
| WITH SPOUSE                  | 1092.84                        |                   | 1951.49 | 1035.66                        | 813.73            | 1849.39  | N/A                                      | N/A               | N/A        | 1035.66   | 813.73                  | 1849.39  |
| WITH CHILDREN                | 689.35                         |                   | 1230.98 | 653.36                         | 513.35            | 1166.71  | N/A                                      | N/A               | N/A        | 653.36  | 513.36                  | 1166.72  |
| FAMILY                       | 1087.53                        |                   | 1942.00 | 1030.70                        | 809.82            | 1840.52  | N/A                                      | N/A               | N/A        | 1030.69   | 809.83                  | 1840.52  |
| RETIREE WITH 1 MEDICAR       | <u>RE</u>                      |                   |         |                                |                   |          |  |                   |            |   |                         |          |
| SINGLE                       | 201.27                         | 158.13            | 359.40  | 194.05                         | 152.46            | 346.51   | N/A                                      | N/A               | N/A        | 194.04  | 152.46                  | 346.50   |
| WITH SPOUSE                  | 743.60                         |                   | 1327.84 | 709.18                         | 557.21            | 1266.39  | N/A                                      | N/A               | N/A        | 709.17  | 557.21                  | 1266.38  |
| WITH CHILDREN                | 348.35                         |                   | 622.04  | 333.80                         | 262.27            | 596.07   | N/A                                      | N/A               | N/A        | 333.79  | 262.27                  | 596.0    |
| FAMILY                       | 990.75                         |                   | 1769.20 | 943.95                         | 741.68            | 1685.63  | N/A                                      | N/A               | N/A        | 943.95  | 741.68                  | 1685.63  |
| RETIREE WITH 2 MEDICAR       | <u>RE</u>                      |                   |         |                                |                   |          |  |                   |            |   |                         |          |
| WITH SPOUSE                  | 361.77                         | 284.23            | 646.00  | 347.84                         | 273.29            | 621.13   | N/A                                      | N/A               | N/A        | 347.84  | 273.30                  | 621.14   |
| FAMILY                       | 447.92                         | 351.92            | 799.84  | 430.66                         | 338.37            | 769.03   | N/A                                      | N/A               | N/A        | 430.65  | 338.37                  | 769.02   |
| C.O.B.R.A.                   |                                |                   |         |                                |                   |          |  |                   |            |   |                         |          |
| SINGLE                       | _                              | _                 | _       | _                              | _                 | _        | _  | _                 | _          | _   | _                       | _        |
| WITH SPOUSE                  | _                              | _                 | _       | _                              | _                 | _        | _  | _                 | _          | _   | _                       |          |
| WITH CHILDREN                | _                              | — —               | _       | <del>-</del>                   |                   | _        | _  | _                 | _          | _   | _                       | _        |
| FAMILY                       | _                              | _                 | _       | _                              | _                 | _        | _  | _                 | _          | _   | _                       | _        |
| DISABILITY C.O.B.R.A.        |                                |                   |         |                                |                   |          |  |                   |            |   |                         |          |
| SINGLE                       | _                              | _                 | _       | _                              |                   | _        | _  | _                 | _          | <u>-</u>  | _                       | <u>-</u> |
| WITH SPOUSE                  | $\equiv$                       | _                 | <u></u> | <u> </u>                       | <u> </u>          | <u> </u> | _  | _                 | <u></u>    | <del></del> -   | <u> </u>                | -        |
| WITH SPOOSE<br>WITH CHILDREN | <u> </u>                       | _                 |         | <u> </u>                       | <u></u>           | <u> </u> | <u> 1</u>                                | <u></u>           | <u></u>    | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                   | - 10 G (10 <del>-</del> | _        |
| FAMILY                       |                                |                   | _       | _                              | <u> </u>          | <u>—</u> | <u> -</u>                                | <u> </u>          | <u>-</u> - | <u>-</u> -  | <u></u>                 | -        |

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.

\* These rates do not apply to active employees or COBRA participants.

Approved Musik Musik