



OFFICE OF GROUP BENEFITS  
**OFFICIAL SCHEDULE OF PREMIUM RATES**

Rates effective January 1, 2016 ( 38% participation rate )

For a complete list of rates at all participation levels please visit [www.groupbenefits.org](http://www.groupbenefits.org); School Board employee contributions may be different.

	Magnolia Open Access Administered by Blue Cross			Magnolia Local Administered by Blue Cross			Magnolia Local Plus Administered by Blue Cross			Pelican HSA 775 Administered by Blue Cross			Pelican HRA 1000 Administered by Blue Cross			Vantage Medical Home HMO Insured by Vantage Health Plan		
	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	State Share	Employee Share	Total
<b>ACTIVE EMPLOYEE</b>																		
ENROLLEE ONLY	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ENROLLEE + 1 (SPOUSE)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ENROLLEE + 1 (CHILD)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ENROLLEE + CHILDREN FAMILY	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>RETIREE WITHOUT MEDICARE &amp; RE-EMPLOYED RETIREE</b>																		
ENROLLEE ONLY	461.94	753.72	1,215.66	393.08	641.34	1,034.42	445.76	727.32	1,173.08	N/A	N/A	N/A	289.78	472.80	762.58	444.70	725.54	1,170.24
ENROLLEE + 1 (SPOUSE)	815.72	1,330.92	2,146.64	694.10	1,132.48	1,826.58	787.10	1,284.22	2,071.32	N/A	N/A	N/A	511.66	834.84	1,346.50	785.20	1,281.10	2,066.30
ENROLLEE + 1 (CHILD)	514.54	839.52	1,354.06	437.84	714.36	1,152.20	496.54	810.16	1,306.70	N/A	N/A	N/A	322.88	526.82	849.70	495.34	808.20	1,303.54
ENROLLEE + CHILDREN FAMILY	514.54	839.52	1,354.06	437.84	714.36	1,152.20	496.54	810.16	1,306.70	N/A	N/A	N/A	322.88	526.82	849.70	495.34	808.20	1,303.54
FAMILY	811.76	1,324.44	2,136.20	690.72	1,126.98	1,817.70	783.32	1,278.06	2,061.38	N/A	N/A	N/A	509.14	830.70	1,339.84	781.44	1,274.96	2,056.40
<b>RETIREE WITH 1 MEDICARE</b>																		
ENROLLEE ONLY	150.23	245.11	395.34	127.83	208.56	336.39	147.47	240.62	388.09	N/A	N/A	N/A	94.24	153.75	247.99	147.12	240.02	387.14
ENROLLEE + 1 (SPOUSE)	555.04	905.58	1,460.62	472.28	770.57	1,242.85	538.98	879.38	1,418.36	N/A	N/A	N/A	348.15	568.04	916.19	537.66	877.26	1,414.92
ENROLLEE + 1 (CHILD)	260.01	424.23	684.24	221.24	360.98	582.22	253.69	413.91	667.60	N/A	N/A	N/A	163.16	266.20	429.36	253.08	412.90	665.98
ENROLLEE + CHILDREN FAMILY	260.01	424.23	684.24	221.24	360.98	582.22	253.69	413.91	667.60	N/A	N/A	N/A	163.16	266.20	429.36	253.08	412.90	665.98
FAMILY	739.53	1,206.59	1,946.12	629.27	1,026.71	1,655.98	717.41	1,170.50	1,887.91	N/A	N/A	N/A	463.84	756.80	1,220.64	715.66	1,167.68	1,883.34
<b>RETIREE WITH 2 MEDICARE</b>																		
ENROLLEE + 1 (SPOUSE)	270.03	440.57	710.60	229.77	374.89	604.66	264.35	431.32	695.67	N/A	N/A	N/A	169.39	276.37	445.76	263.72	430.26	693.98
FAMILY	334.33	545.49	879.82	284.49	464.17	748.66	327.30	534.01	861.31	N/A	N/A	N/A	209.71	342.15	551.86	326.50	532.72	859.22
<b>C.O.B.R.A.</b>																		
ENROLLEE ONLY	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ENROLLEE + 1 (SPOUSE)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ENROLLEE + 1 (CHILD)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ENROLLEE + CHILDREN FAMILY	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FAMILY	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>DISABILITY C.O.B.R.A.</b>																		
ENROLLEE ONLY	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ENROLLEE + 1 (SPOUSE)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ENROLLEE + 1 (CHILD)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ENROLLEE + CHILDREN FAMILY	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FAMILY	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

Approved