



OFFICE OF GROUP BENEFITS

OFFICIAL SCHEDULE OF MONTHLY PREMIUM RATES

Rates effective January 1, 2022 (19% employer participation level)

For a complete list of premium rates at all employer participation levels please visit info.groupbenefits.org.

| | Magnolia Open Access Administered by Blue Cross | | | Magnolia Local Administered by Blue Cross | | | Magnolia Local Plus Administered by Blue Cross | | | Pelican HSA775 Administered by Blue Cross | | | Pelican HRA1000 Administered by Blue Cross | | | Vantage Medical Home HMO Insured by Vantage Health Plan | | |
|---|--|----------------|---------------|--|----------------|---------------|---|----------------|---------------|--|----------------|---------------|---|----------------|---------------|--|----------------|---------------|
| | State Share | Employee Share | Total Premium | State Share | Employee Share | Total Premium | State Share | Employee Share | Total Premium | State Share | Employee Share | Total Premium | State Share | Employee Share | Total Premium | State Share | Employee Share | Total Premium |
| RETIREE WITHOUT MEDICARE & RE-EMPLOYED RETIREE | | | | | | | | | | | | | | | | | | |
| ENROLLEE ONLY | 288.78 | 1,231.24 | 1,520.02 | 235.44 | 1,003.82 | 1,239.26 | 278.68 | 1,188.10 | 1,466.78 | N/A | N/A | N/A | 173.56 | 740.02 | 913.58 | 291.32 | 1,241.92 | 1,533.24 |
| ENROLLEE + 1 (SPOUSE) | 509.98 | 2,174.10 | 2,684.08 | 415.76 | 1,772.52 | 2,188.28 | 492.06 | 2,097.84 | 2,589.90 | N/A | N/A | N/A | 306.50 | 1,306.64 | 1,613.14 | 514.38 | 2,192.92 | 2,707.30 |
| ENROLLEE + 1 (CHILD) | 321.66 | 1,371.42 | 1,693.08 | 262.28 | 1,118.08 | 1,380.36 | 310.44 | 1,323.44 | 1,633.88 | N/A | N/A | N/A | 193.42 | 824.54 | 1,017.96 | 324.52 | 1,383.40 | 1,707.92 |
| ENROLLEE + CHILDREN | 321.66 | 1,371.42 | 1,693.08 | 262.28 | 1,118.08 | 1,380.36 | 310.44 | 1,323.44 | 1,633.88 | N/A | N/A | N/A | 193.42 | 824.54 | 1,017.96 | 324.52 | 1,383.40 | 1,707.92 |
| FAMILY | 507.52 | 2,163.52 | 2,671.04 | 413.76 | 1,763.92 | 2,177.68 | 489.72 | 2,087.76 | 2,577.48 | N/A | N/A | N/A | 304.96 | 1,300.20 | 1,605.16 | 511.92 | 2,182.38 | 2,694.30 |
| RETIREE WITH 1 MEDICARE | | | | | | | | | | | | | | | | | | |
| ENROLLEE ONLY | 93.90 | 400.40 | 494.30 | 76.54 | 326.42 | 402.96 | 92.18 | 393.06 | 485.24 | N/A | N/A | N/A | 56.44 | 240.62 | 297.06 | 96.38 | 410.86 | 507.24 |
| ENROLLEE + 1 (SPOUSE) | 346.98 | 1,479.30 | 1,826.28 | 282.88 | 1,206.06 | 1,488.94 | 336.98 | 1,436.50 | 1,773.48 | N/A | N/A | N/A | 208.54 | 889.06 | 1,097.60 | 352.28 | 1,501.58 | 1,853.86 |
| ENROLLEE + 1 (CHILD) | 162.58 | 692.96 | 855.54 | 132.52 | 564.98 | 697.50 | 158.58 | 676.12 | 834.70 | N/A | N/A | N/A | 97.74 | 416.64 | 514.38 | 165.80 | 706.76 | 872.56 |
| ENROLLEE + CHILDREN | 162.58 | 692.96 | 855.54 | 132.52 | 564.98 | 697.50 | 158.58 | 676.12 | 834.70 | N/A | N/A | N/A | 97.74 | 416.64 | 514.38 | 165.80 | 706.76 | 872.56 |
| FAMILY | 462.34 | 1,971.02 | 2,433.36 | 376.94 | 1,606.96 | 1,983.90 | 448.48 | 1,912.10 | 2,360.58 | N/A | N/A | N/A | 277.82 | 1,184.52 | 1,462.34 | 468.86 | 1,998.70 | 2,467.56 |
| RETIREE WITH 2 MEDICARE | | | | | | | | | | | | | | | | | | |
| ENROLLEE + 1 (SPOUSE) | 168.78 | 719.70 | 888.48 | 137.62 | 586.76 | 724.38 | 165.26 | 704.56 | 869.82 | N/A | N/A | N/A | 101.46 | 432.58 | 534.04 | 172.74 | 736.50 | 909.24 |
| FAMILY | 209.00 | 891.06 | 1,100.06 | 170.40 | 726.52 | 896.92 | 204.62 | 872.34 | 1,076.96 | N/A | N/A | N/A | 125.60 | 535.52 | 661.12 | 213.88 | 911.86 | 1,125.74 |

- NOTE:
- 1) The breakdown between the *State Share* and the *Employee Share* amounts shown may not be accurate for certain school board employees due to local funding that affects agency funding, which affects agency contributions. *Total Premium* amounts are correct for all non-risk rated agencies.
 - 2) The breakdown between the *State Share* and *Employee Share* amounts shown for retirees without Medicare coverage is determined based upon the requirements of LA R.S. 42:851(C)(3), which supersedes the requirements of LA R.S. 42:851(E)(1).
 - 3) All plan members who retired on or after July 1, 1997 must have Medicare Part A and Part B to qualify for reduced premium rates.

Approved