

# 70/30 & 80/20 Plan for 100% Contributory Leave of Absence Subscribers



| Monthly Premium Rates<br>January 1, 2018–December 31, 2018 | 80/20 PLAN                     |            | 70/30 PLAN                     |            |
|--|--------------------------------|------------|--------------------------------|------------|
|  | TOBACCO ATTESTATION COMPLETE?* |            | TOBACCO ATTESTATION COMPLETE?* |            |
|  | YES                            | NO         | YES                            | NO         |
| <b>ACTIVE SUBSCRIBERS</b>                                  |                                |            |                                |            |
| Subscriber   | \$548.68                       | \$608.68   | \$523.68                       | \$583.68   |
| Subscriber + Child(ren)                                    | \$803.68                       | \$863.68   | \$716.68                       | \$776.68   |
| Subscriber + Spouse  | \$1,198.68                     | \$1,258.68 | \$1,088.68                     | \$1,148.68 |
| Subscriber + Family  | \$1,218.68                     | \$1,278.68 | \$1,096.68                     | \$1,156.68 |

**Notes:**

1. If your employment contract is for less than 12 months, contact your Health Benefits Representative or benefits office for monthly rates.
  2. If you are actively employed and you or your dependent(s) are Medicare eligible, the State Health Plan is the primary insurer and the Non-Medicare rates apply. An exception to this would be if you or your dependent(s) are Medicare eligible due to end stage renal disease (ESRD).
- \*Premium credit completed during enrollment period.