



2018 Plan Year

Non-Contraception

Benefit Plan Premiums

Active Employee Premiums *With Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Employee Only	\$0	\$25	\$40	\$65	\$69	\$94
Employee and Spouse¹	72	97	240	265	312	337
Employee and One Child	11	36	68	93	109	134
Employee and Two Children	17	42	88	113	140	165
Employee and Three Children	22	47	108	133	171	196
Employee and Four Children	30	55	128	153	203	228
Employee and Five or more Children	31	56	148	173	239	264
Employee, Spouse and One Child¹	84	109	268	293	352	377
Employee, Spouse and Two Children¹	90	115	287	312	383	408
Employee, Spouse and Three Children¹	95	120	307	332	414	439
Employee, Spouse and Four Children¹	103	128	327	352	446	471
Employee, Spouse and Five or more Children¹	104	129	347	372	482	507

1. The premium listed for "Employee and Spouse" and "Employee, Spouse and Child(ren)" assumes that both the employee and spouse are in the Tobacco-Free Incentive. If only one is in the Tobacco-Free Incentive, \$40 will be added to the listed premium.

Active Employee Premiums *Without Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Employee Only	\$40	\$65	\$80	\$105	\$109	\$134
Employee and Spouse¹	152	177	320	345	392	417
Employee and One Child	51	76	108	133	149	174
Employee and Two Children	57	82	128	153	180	205
Employee and Three Children	62	87	148	173	211	236
Employee and Four Children	70	95	168	193	243	268
Employee and Five or more Children	71	96	188	213	279	304
Employee, Spouse and One Child¹	164	189	348	373	432	457
Employee, Spouse and Two Children¹	170	195	367	392	463	488
Employee, Spouse and Three Children¹	175	200	387	412	494	519
Employee, Spouse and Four Children¹	183	208	407	432	526	551
Employee, Spouse and Five or more Children¹	184	209	427	452	562	587

1. The premium listed for "Employee and Spouse" and "Employee, Spouse and Child(ren)" assumes that both the employee and spouse are not in the Tobacco-Free Incentive. If one is in the Tobacco-Free Incentive, \$40 will be subtracted from the listed premium.

Leave of Absence Subscriber Premiums *With Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Subscriber Only	\$507	\$532	\$625	\$650	\$654	\$679
Subscriber and Spouse¹	1,243	1,268	1,529	1,554	1,600	1,625
Subscriber and One Child	705	730	858	883	898	923
Subscriber and Two Children	903	928	1,091	1,116	1,143	1,168
Subscriber and Three Children	1,101	1,126	1,324	1,349	1,387	1,412
Subscriber and Four Children	1,298	1,323	1,557	1,582	1,631	1,656
Subscriber and Five or more Children	1,582	1,607	1,891	1,916	1,982	2,007
Subscriber, Spouse and One Child¹	1,440	1,465	1,762	1,787	1,845	1,870
Subscriber, Spouse and Two Children¹	1,638	1,663	1,994	2,019	2,089	2,114
Subscriber, Spouse and Three Children¹	1,836	1,861	2,227	2,252	2,333	2,358
Subscriber, Spouse and Four Children¹	2,034	2,059	2,460	2,485	2,578	2,603
Subscriber, Spouse and Five or more Children¹	2,318	2,343	2,795	2,820	2,928	2,953

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are in the Tobacco-Free Incentive. If only one is in the Tobacco-Free Incentive, \$40 will be added to the listed premium.

Leave of Absence Subscriber Premiums *Without Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Subscriber Only	\$547	\$572	\$665	\$690	\$694	\$719
Subscriber and Spouse¹	1,323	1,348	1,609	1,634	1,680	1,705
Subscriber and One Child	745	770	898	923	938	963
Subscriber and Two Children	943	968	1,131	1,156	1,183	1,208
Subscriber and Three Children	1,141	1,166	1,364	1,389	1,427	1,452
Subscriber and Four Children	1,338	1,363	1,597	1,622	1,671	1,696
Subscriber and Five or more Children	1,622	1,647	1,931	1,956	2,022	2,047
Subscriber, Spouse and One Child¹	1,520	1,545	1,842	1,867	1,925	1,950
Subscriber, Spouse and Two Children¹	1,718	1,743	2,074	2,099	2,169	2,194
Subscriber, Spouse and Three Children¹	1,916	1,941	2,307	2,332	2,413	2,438
Subscriber, Spouse and Four Children¹	2,114	2,139	2,540	2,565	2,658	2,683
Subscriber, Spouse and Five or more Children¹	2,398	2,423	2,875	2,900	3,008	3,033

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are not in the Tobacco-Free Incentive. If one is in the Tobacco-Free Incentive, \$40 will be subtracted from the listed premium.

COBRA Subscriber Premiums *With Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Subscriber Only	\$517	\$542	\$637	\$662	\$667	\$692
Subscriber and Spouse¹	1,267	1,292	1,559	1,584	1,632	1,657
Subscriber and One Child	719	744	875	900	916	941
Subscriber and Two Children	921	946	1,113	1,138	1,166	1,191
Subscriber and Three Children	1,123	1,148	1,350	1,375	1,415	1,440
Subscriber and Four Children	1,324	1,349	1,588	1,613	1,664	1,689
Subscriber and Five or more Children	1,614	1,639	1,929	1,954	2,022	2,047
Subscriber, Spouse and One Child¹	1,469	1,494	1,797	1,822	1,882	1,907
Subscriber, Spouse and Two Children¹	1,671	1,696	2,034	2,059	2,131	2,156
Subscriber, Spouse and Three Children¹	1,873	1,898	2,272	2,297	2,380	2,405
Subscriber, Spouse and Four Children¹	2,074	2,099	2,509	2,534	2,629	2,654
Subscriber, Spouse and Five or more Children¹	2,364	2,389	2,851	2,876	2,987	3,012
Child Only	202	202	238	238	249	249
Spousal Continuation without Medicare	517	542	637	662	667	692
Spousal Continuation with Medicare	Not Available		317	317	338	338

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are in the Tobacco-Free Incentive. If only one is in the Tobacco-Free Incentive, \$40 will be added to the listed premium.

COBRA Subscriber Premiums *Without Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Subscriber Only	\$557	\$582	\$677	\$702	\$707	\$732
Subscriber and Spouse¹	1,347	1,372	1,639	1,664	1,712	1,737
Subscriber and One Child	759	784	915	940	956	981
Subscriber and Two Children	961	986	1,153	1,178	1,206	1,231
Subscriber and Three Children	1,163	1,188	1,390	1,415	1,455	1,480
Subscriber and Four Children	1,364	1,389	1,628	1,653	1,704	1,729
Subscriber and Five or more Children	1,654	1,679	1,969	1,994	2,062	2,087
Subscriber, Spouse and One Child¹	1,549	1,574	1,877	1,902	1,962	1,987
Subscriber, Spouse and Two Children¹	1,751	1,776	2,114	2,139	2,211	2,236
Subscriber, Spouse and Three Children¹	1,953	1,978	2,352	2,377	2,460	2,485
Subscriber, Spouse and Four Children¹	2,154	2,179	2,589	2,614	2,709	2,734
Subscriber, Spouse and Five or more Children¹	2,444	2,469	2,931	2,956	3,067	3,092
Child Only	202	202	238	238	249	249
Spousal Continuation without Medicare	557	582	677	702	707	732
Spousal Continuation with Medicare	Not Available		317	317	338	338

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are not in the Tobacco-Free Incentive. If one is in the Tobacco-Free Incentive, \$40 will be subtracted from the listed premium.

Retiree & Survivor without Medicare Total Premiums *With Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Retiree only without Medicare	\$875	\$900	1,064	1,089	1,085	\$1,110
Retiree and Spouse without Medicare¹	1,749	1,774	2,128	2,153	2,170	2,195
Retiree, Spouse without Medicare and One Child¹	1,994	2,019	2,421	2,446	2,469	2,494
Retiree, Spouse without Medicare and Two Children¹	2,239	2,264	2,715	2,740	2,768	2,793
Retiree, Spouse without Medicare and Three Children¹	2,484	2,509	3,008	3,033	3,068	3,093
Retiree, Spouse without Medicare and Four Children¹	2,729	2,754	3,302	3,327	3,367	3,392
Retiree, Spouse without Medicare and Five or more Children¹	3,079	3,104	3,721	3,746	3,795	3,820
Retiree without Medicare, Spouse with Medicare	Not Available		1,381	1,406	1,423	1,448
Retiree, Spouse with Medicare and One Child	Not Available		1,675	1,700	1,722	1,747
Retiree, Spouse with Medicare and Two Children	Not Available		1,968	1,993	2,022	2,047
Retiree, Spouse with Medicare and Three Children	Not Available		2,262	2,287	2,321	2,346
Retiree, Spouse with Medicare and Four Children	Not Available		2,555	2,580	2,621	2,646
Retiree, Spouse with Medicare and Five or more Children	Not Available		2,974	2,999	3,048	3,073
Retiree and One Child	1,120	1,145	1,357	1,382	1,384	1,409
Retiree and Two Children	1,364	1,389	1,651	1,676	1,684	1,709
Retiree and Three Children	1,609	1,634	1,945	1,970	1,983	2,008
Retiree and Four Children	1,854	1,879	2,238	2,263	2,282	2,307
Retiree and Five or more Children	2,204	2,229	2,657	2,682	2,710	2,735
Surviving Child	245	245	292	292	298	298

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are in the Tobacco-Free Incentive. If only one is in the Tobacco-Free Incentive, \$40 will be added to the listed premium.

* Retiree premiums listed in this guide do not reflect the MCHCP contribution. The contribution is based on level of coverage, creditable years of service at retirement, and Medicare status. To review the 2018 MCHCP contribution amount or calculate premiums, log in to myMCHCP.

Retiree & Survivor without Medicare Total Premiums *Without Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Retiree only without Medicare	\$915	\$940	\$1,104	\$1,129	\$1,125	\$1,150
Retiree and Spouse without Medicare¹	1,829	1,854	2,208	2,233	2,250	2,275
Retiree, Spouse without Medicare and One Child¹	2,074	2,099	2,501	2,526	2,549	2,574
Retiree, Spouse without Medicare and Two Children¹	2,319	2,344	2,795	2,820	2,848	2,873
Retiree, Spouse without Medicare and Three Children¹	2,564	2,589	3,088	3,113	3,148	3,173
Retiree, Spouse without Medicare and Four Children¹	2,809	2,834	3,382	3,407	3,447	3,472
Retiree, Spouse without Medicare and Five or more Children¹	3,159	3,184	3,801	3,826	3,875	3,900
Retiree without Medicare, Spouse with Medicare	Not Available		1,421	1,446	1,463	1,488
Retiree, Spouse with Medicare and One Child	Not Available		1,715	1,740	1,762	1,787
Retiree, Spouse with Medicare and Two Children	Not Available		2,008	2,033	2,062	2,087
Retiree, Spouse with Medicare and Three Children	Not Available		2,302	2,327	2,361	2,386
Retiree, Spouse with Medicare and Four Children	Not Available		2,595	2,620	2,661	2,686
Retiree, Spouse with Medicare and Five or more Children	Not Available		3,014	3,039	3,088	3,113
Retiree and One Child	1,160	1,185	1,397	1,422	1,424	1,449
Retiree and Two Children	1,404	1,429	1,691	1,716	1,724	1,749
Retiree and Three Children	1,649	1,674	1,985	2,010	2,023	2,048
Retiree and Four Children	1,894	1,919	2,278	2,303	2,322	2,347
Retiree and Five or more Children	2,244	2,269	2,697	2,722	2,750	2,775
Surviving Child	245	245	292	292	298	298

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are not in the Tobacco-Free Incentive. If one is in the Tobacco-Free Incentive, \$40 will be subtracted from the listed premium.

* Retiree premiums listed in this guide do not reflect the MCHCP contribution. The contribution is based on level of coverage, creditable years of service at retirement, and Medicare status. To review the 2018 MCHCP contribution amount or calculate premiums, log in to myMCHCP.

Retiree & Survivor with Medicare Total Premiums *without contraception coverage*

Level of Coverage	PPO 600 Plan	PPO 300 Plan	Medicare Prescription Drug Only Plan (All covered members must have Medicare)
Retiree only with Medicare	\$317	\$338	\$188
Retiree and Spouse without Medicare	1,381	1,423	Not Available
Retiree, Spouse without Medicare and One Child	1,675	1,722	Not Available
Retiree, Spouse without Medicare and Two Children	1,968	2,022	Not Available
Retiree, Spouse without Medicare and Three Children	2,262	2,321	Not Available
Retiree, Spouse without Medicare and Four Children	2,555	2,621	Not Available
Retiree, Spouse without Medicare and Five or more Children	2,974	3,048	Not Available
Retiree and Spouse with Medicare	635	676	375
Retiree, Spouse with Medicare and One Child	928	976	Not Available
Retiree, Spouse with Medicare and Two Children	1,222	1,275	Not Available
Retiree, Spouse with Medicare and Three Children	1,515	1,575	Not Available
Retiree, Spouse with Medicare and Four Children	1,809	1,874	Not Available
Retiree, Spouse with Medicare and Five or more Children	2,228	2,302	Not Available
Retiree and One Child	611	638	Not Available
Retiree and Two Children	904	937	Not Available
Retiree and Three Children	1,198	1,236	Not Available
Retiree and Four Children	1,492	1,536	Not Available
Retiree and Five or more Children	1,911	1,963	Not Available
Surviving Child	292	298	Not Available

* Retiree premiums listed in this guide do not reflect the MCHCP contribution. The contribution is based on level of coverage, creditable years of service at retirement, and Medicare status. To review the 2018 MCHCP contribution amount or calculate premiums, log in to myMCHCP.

Long-Term Disability Subscriber without Medicare Premiums *With Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Subscriber only without Medicare	\$648	\$673	\$837	\$862	\$858	\$883
Subscriber and Spouse without Medicare¹	1,336	1,361	1,715	1,740	1,757	1,782
Subscriber, Spouse without Medicare and One Child¹	1,469	1,494	1,896	1,921	1,944	1,969
Subscriber, Spouse without Medicare and Two Children¹	1,714	1,739	2,190	2,215	2,243	2,268
Subscriber, Spouse without Medicare and Three Children¹	1,959	1,984	2,483	2,508	2,543	2,568
Subscriber, Spouse without Medicare and Four Children¹	2,204	2,229	2,777	2,802	2,842	2,867
Subscriber, Spouse without Medicare and Five or more Children¹	2,554	2,579	3,196	3,221	3,270	3,295
Subscriber without Medicare, Spouse with Medicare	Not Available		1,072	1,097	1,114	1,139
Subscriber, Spouse with Medicare and One Child	Not Available		1,255	1,280	1,302	1,327
Subscriber, Spouse with Medicare and Two Children	Not Available		1,548	1,573	1,602	1,627
Subscriber, Spouse with Medicare and Three Children	Not Available		1,842	1,867	1,901	1,926
Subscriber, Spouse with Medicare and Four Children	Not Available		2,135	2,160	2,201	2,226
Subscriber, Spouse with Medicare and Five or more Children	Not Available		2,554	2,579	2,628	2,653
Subscriber and One Child	784	809	1,021	1,046	1,048	1,073
Subscriber and Two Children	1,028	1,053	1,315	1,340	1,348	1,373
Subscriber and Three Children	1,273	1,298	1,609	1,634	1,647	1,672
Subscriber and Four Children	1,518	1,543	1,902	1,927	1,946	1,971
Subscriber and Five or more Children	1,868	1,893	2,321	2,346	2,374	2,399

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are in the Tobacco-Free Incentive. If only one is in the Tobacco-Free Incentive, \$40 will be added to the listed premium.

Long-Term Disability Subscriber without Medicare Premiums *Without Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Subscriber only without Medicare	\$688	\$713	\$877	\$902	\$898	\$923
Subscriber and Spouse without Medicare¹	1,416	1,441	1,795	1,820	1,837	1,862
Subscriber, Spouse without Medicare and One Child¹	1,549	1,574	1,976	2,001	2,024	2,049
Subscriber, Spouse without Medicare and Two Children¹	1,794	1,819	2,270	2,295	2,323	2,348
Subscriber, Spouse without Medicare and Three Children¹	2,039	2,064	2,563	2,588	2,623	2,648
Subscriber, Spouse without Medicare and Four Children¹	2,284	2,309	2,857	2,882	2,922	2,947
Subscriber, Spouse without Medicare and Five or more Children¹	2,634	2,659	3,276	3,301	3,350	3,375
Subscriber without Medicare, Spouse with Medicare	Not Available		1,112	1,137	1,154	1,179
Subscriber, Spouse with Medicare and One Child	Not Available		1,295	1,320	1,342	1,367
Subscriber, Spouse with Medicare and Two Children	Not Available		1,588	1,613	1,642	1,667
Subscriber, Spouse with Medicare and Three Children	Not Available		1,882	1,907	1,941	1,966
Subscriber, Spouse with Medicare and Four Children	Not Available		2,175	2,200	2,241	2,266
Subscriber, Spouse with Medicare and Five or more Children	Not Available		2,594	2,619	2,668	2,693
Subscriber and One Child	824	849	1,061	1,086	1,088	1,113
Subscriber and Two Children	1,068	1,093	1,355	1,380	1,388	1,413
Subscriber and Three Children	1,313	1,338	1,649	1,674	1,687	1,712
Subscriber and Four Children	1,558	1,583	1,942	1,967	1,986	2,011
Subscriber and Five or more Children	1,908	1,933	2,361	2,386	2,414	2,439

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are not in the Tobacco-Free Incentive. If one is in the Tobacco-Free Incentive, \$40 will be subtracted from the listed premium.

Long-Term Disability Subscriber with Medicare Premiums

without contraception coverage

Level of Coverage	PPO 600 Plan	PPO 300 Plan	Medicare Prescription Drug Only Plan (All covered members must have Medicare)
Subscriber only with Medicare	\$199	\$220	\$119
Subscriber and Spouse without Medicare	1,044	1,086	Not Available
Subscriber, Spouse without Medicare and One Child	1,225	1,272	Not Available
Subscriber, Spouse without Medicare and Two Children	1,518	1,572	Not Available
Subscriber, Spouse without Medicare and Three Children	1,812	1,871	Not Available
Subscriber, Spouse without Medicare and Four Children	2,105	2,171	Not Available
Subscriber, Spouse without Medicare and Five or more Children	2,524	2,598	Not Available
Subscriber and Spouse with Medicare	402	443	238
Subscriber, Spouse with Medicare and One Child	581	629	Not Available
Subscriber, Spouse with Medicare and Two Children	875	928	Not Available
Subscriber, Spouse with Medicare and Three Children	1,168	1,228	Not Available
Subscriber, Spouse with Medicare and Four Children	1,462	1,527	Not Available
Subscriber, Spouse with Medicare and Five or more Children	1,881	1,955	Not Available
Subscriber and One Child	382	409	Not Available
Subscriber and Two Children	675	708	Not Available
Subscriber and Three Children	969	1,007	Not Available
Subscriber and Four Children	1,263	1,307	Not Available
Subscriber and Five or more Children	1,682	1,734	Not Available

Terminated Vested Subscriber without Medicare Premiums *With Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Subscriber only without Medicare	\$703	\$728	\$855	\$880	\$871	\$896
Subscriber and Spouse without Medicare¹	1,406	1,431	1,709	1,734	1,743	1,768
Subscriber, Spouse without Medicare and One Child¹	1,603	1,628	1,945	1,970	1,983	2,008
Subscriber, Spouse without Medicare and Two Children¹	1,800	1,825	2,181	2,206	2,224	2,249
Subscriber, Spouse without Medicare and Three Children¹	1,996	2,021	2,417	2,442	2,464	2,489
Subscriber, Spouse without Medicare and Four Children¹	2,193	2,218	2,652	2,677	2,705	2,730
Subscriber, Spouse without Medicare & Five or more Children¹	2,474	2,499	2,989	3,014	3,048	3,073
Subscriber without Medicare, Spouse with Medicare	Not Available		1,172	1,197	1,209	1,234
Subscriber, Spouse with Medicare and One Child	Not Available		1,408	1,433	1,450	1,475
Subscriber, Spouse with Medicare and Two Children	Not Available		1,643	1,668	1,690	1,715
Subscriber, Spouse with Medicare and Three Children	Not Available		1,879	1,904	1,931	1,956
Subscriber, Spouse with Medicare and Four Children	Not Available		2,115	2,140	2,171	2,196
Subscriber, Spouse with Medicare and Five or more Children	Not Available		2,452	2,477	2,515	2,540
Subscriber and One Child	900	925	1,090	1,115	1,112	1,137
Subscriber and Two Children	1,097	1,122	1,326	1,351	1,352	1,377
Subscriber and Three Children	1,293	1,318	1,562	1,587	1,593	1,618
Subscriber and Four Children	1,490	1,515	1,798	1,823	1,833	1,858
Subscriber and Five or more Children	1,771	1,796	2,135	2,160	2,177	2,202

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are in the Tobacco-Free Incentive. If only one is in the Tobacco-Free Incentive, \$40 will be added to the listed premium.

Terminated Vested Subscriber without Medicare Premiums *Without Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Subscriber only without Medicare	\$743	\$768	\$895	\$920	\$911	\$936
Subscriber and Spouse without Medicare¹	1,486	1,511	1,789	1,814	1,823	1,848
Subscriber, Spouse without Medicare and One Child¹	1,683	1,708	2,025	2,050	2,063	2,088
Subscriber, Spouse without Medicare and Two Children¹	1,880	1,905	2,261	2,286	2,304	2,329
Subscriber, Spouse without Medicare and Three Children¹	2,076	2,101	2,497	2,522	2,544	2,569
Subscriber, Spouse without Medicare and Four Children¹	2,273	2,298	2,732	2,757	2,785	2,810
Subscriber, Spouse without Medicare and Five or more Children¹	2,554	2,579	3,069	3,094	3,128	3,153
Subscriber without Medicare, Spouse with Medicare	Not Available		1,212	1,237	1,249	1,274
Subscriber, Spouse with Medicare and One Child	Not Available		1,448	1,473	1,490	1,515
Subscriber, Spouse with Medicare and Two Children	Not Available		1,683	1,708	1,730	1,755
Subscriber, Spouse with Medicare and Three Children	Not Available		1,919	1,944	1,971	1,996
Subscriber, Spouse with Medicare and Four Children	Not Available		2,155	2,180	2,211	2,236
Subscriber, Spouse with Medicare and Five or more Children	Not Available		2,492	2,517	2,555	2,580
Subscriber and One Child	940	965	1,130	1,155	1,152	1,177
Subscriber and Two Children	1,137	1,162	1,366	1,391	1,392	1,417
Subscriber and Three Children	1,333	1,358	1,602	1,627	1,633	1,658
Subscriber and Four Children	1,530	1,555	1,838	1,863	1,873	1,898
Subscriber and Five or more Children	1,811	1,836	2,175	2,200	2,217	2,242

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are not in the Tobacco-Free Incentive. If one is in the Tobacco-Free Incentive, \$40 will be subtracted from the listed premium.

Terminated Vested Subscriber with Medicare Premiums *without contraception coverage*

Level of Coverage	PPO 600 Plan	PPO 300 Plan	Medicare Prescription Drug Only Plan (All covered members must have Medicare)
Subscriber only with Medicare	\$317	\$338	\$188
Subscriber and Spouse without Medicare	1,172	1,209	Not Available
Subscriber, Spouse without Medicare and One Child	1,465	1,509	Not Available
Subscriber, Spouse without Medicare and Two Children	1,759	1,808	Not Available
Subscriber, Spouse without Medicare and Three Children	2,052	2,108	Not Available
Subscriber, Spouse without Medicare and Four Children	2,346	2,407	Not Available
Subscriber, Spouse without Medicare and Five or more Children	2,765	2,835	Not Available
Subscriber and Spouse with Medicare	635	676	375
Subscriber, Spouse with Medicare and One Child	928	976	Not Available
Subscriber, Spouse with Medicare and Two Children	1,222	1,275	Not Available
Subscriber, Spouse with Medicare and Three Children	1,515	1,575	Not Available
Subscriber, Spouse with Medicare and Four Children	1,809	1,874	Not Available
Subscriber, Spouse with Medicare and Five or more Children	2,228	2,302	Not Available
Subscriber and One Child	611	638	Not Available
Subscriber and Two Children	904	937	Not Available
Subscriber and Three Children	1,198	1,236	Not Available
Subscriber and Four Children	1,492	1,536	Not Available
Subscriber and Five or more Children	1,911	1,963	Not Available

Level B Foster Parent Premiums *With Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Subscriber Only	\$507	\$532	\$625	\$650	\$654	\$679
Subscriber and Spouse¹	1,243	1,268	1,529	1,554	1,600	1,625
Subscriber and One Child	705	730	858	883	898	923
Subscriber and Two Children	903	928	1,091	1,116	1,143	1,168
Subscriber and Three Children	1,101	1,126	1,324	1,349	1,387	1,412
Subscriber and Four Children	1,298	1,323	1,557	1,582	1,631	1,656
Subscriber and Five or more Children	1,582	1,607	1,891	1,916	1,982	2,007
Subscriber, Spouse and One Child¹	1,440	1,465	1,762	1,787	1,845	1,870
Subscriber, Spouse and Two Children¹	1,638	1,663	1,994	2,019	2,089	2,114
Subscriber, Spouse and Three Children¹	1,836	1,861	2,227	2,252	2,333	2,358
Subscriber, Spouse and Four Children¹	2,034	2,059	2,460	2,485	2,578	2,603
Subscriber, Spouse and Five or more Children¹	2,318	2,343	2,795	2,820	2,928	2,953

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are in the Tobacco-Free Incentive. If only one is in the Tobacco-Free Incentive, \$40 will be added to the listed premium.

Level B Foster Parent Premiums *Without Tobacco-Free Incentive without contraception coverage*

Level of Coverage	HSA Plan		PPO 600 Plan		PPO 300 Plan	
	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium	Partnership Premium	Standard Premium
Subscriber Only	\$547	\$572	\$665	\$690	\$694	\$719
Subscriber and Spouse¹	1,323	1,348	1,609	1,634	1,680	1,705
Subscriber and One Child	745	770	898	923	938	963
Subscriber and Two Children	943	968	1,131	1,156	1,183	1,208
Subscriber and Three Children	1,141	1,166	1,364	1,389	1,427	1,452
Subscriber and Four Children	1,338	1,363	1,597	1,622	1,671	1,696
Subscriber and Five or more Children	1,622	1,647	1,931	1,956	2,022	2,047
Subscriber, Spouse and One Child¹	1,520	1,545	1,842	1,867	1,925	1,950
Subscriber, Spouse and Two Children¹	1,718	1,743	2,074	2,099	2,169	2,194
Subscriber, Spouse and Three Children¹	1,916	1,941	2,307	2,332	2,413	2,438
Subscriber, Spouse and Four Children¹	2,114	2,139	2,540	2,565	2,658	2,683
Subscriber, Spouse and Five or more Children¹	2,398	2,423	2,875	2,900	3,008	3,033

1. The premium listed for "Subscriber and Spouse" and "Subscriber, Spouse and Child(ren)" assumes that both the subscriber and spouse are not in the Tobacco-Free Incentive. If one is in the Tobacco-Free Incentive, \$40 will be subtracted from the listed premium.

