## 2015 HEALTH CARE RATES

| Plan | Full-Time or Part-Time (30-39 hours/week) | Full-Time or <br> Part-Time (30-39 hours/week) | Full-Time or Part-Time (30-39 hours/week) | $\begin{gathered} \text { Part-Time } \\ \text { (20-29 } \\ \text { hours/week) } \end{gathered}$ | $\begin{gathered} \text { Part-Time } \\ (20-29 \\ \text { hours/week) } \end{gathered}$ | $\begin{gathered} \text { Part-Time } \\ (20-29 \\ \text { hours/week) } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Anthem | Monthly <br> (12 pay) | Monthly (10 pay*) | Biweekly <br> (24 pay) | Monthly (10 pay*) | Biweekly <br> (24 pay) | Biweekly (19 deductions, SNS only*) |
| STANDARD POS - HealthKeepers |  |  |  |  |  |  |
| Subscriber Only | \$21.50 | \$25.80 | \$10.75 | \$556.78 | \$231.99 | \$293.04 |
| Subscriber \& Child | \$136.32 | \$163.58 | \$68.16 | \$846.34 | \$352.64 | \$445.44 |
| Subscriber \& Children | \$310.16 | \$372.19 | \$155.08 | \$1,280.54 | \$533.56 | \$673.97 |
| Subscriber \& Spouse | \$215.50 | \$258.60 | \$107.75 | \$1,068.91 | \$445.38 | \$562.59 |
| Subscriber \& Family | \$414.06 | \$496.87 | \$207.03 | \$1,620.05 | \$675.02 | \$852.66 |
| PREMIER POS - HealthKeepers |  |  |  |  |  |  |
| Subscriber Only | \$36.64 | \$43.97 | \$18.32 | \$641.26 | \$267.19 | \$337.50 |
| Subscriber \& Child | \$219.80 | \$263.76 | \$109.90 | \$974.76 | \$406.15 | \$513.03 |
| Subscriber \& Children | \$436.44 | \$523.73 | \$218.22 | \$1,474.80 | \$614.50 | \$776.21 |
| Subscriber \& Spouse | \$320.96 | \$385.15 | \$160.48 | \$1,231.10 | \$512.96 | \$647.95 |
| Subscriber \& Family | \$567.82 | \$681.38 | \$283.91 | \$1,865.90 | \$777.46 | \$982.05 |
| LUMENOS HSA - HealthKeepers |  |  |  |  |  |  |
| Subscriber Only | \$14.84 | \$17.81 | \$7.42 | \$384.17 | \$160.07 | \$202.19 |
| Subscriber \& Child | \$94.06 | \$112.87 | \$47.03 | \$583.97 | \$243.32 | \$307.35 |
| Subscriber \& Children | \$214.00 | \$256.80 | \$107.00 | \$883.61 | \$368.17 | \$465.06 |
| Subscriber \& Spouse | \$148.70 | \$178.44 | \$74.35 | \$737.59 | \$307.33 | \$388.21 |
| Subscriber \& Family | \$285.70 | \$342.84 | \$142.85 | \$1,117.85 | \$465.77 | \$588.34 |
| OUT-OF-AREA PPO - KeyCare |  |  |  |  |  |  |
| Subscriber Only | \$36.64 | \$43.97 | \$18.32 | \$641.26 | \$267.19 | \$337.50 |
| Subscriber \& Child | \$219.80 | \$263.76 | \$109.90 | \$974.76 | \$406.15 | \$513.03 |
| Subscriber \& Children | \$436.44 | \$523.73 | \$218.22 | \$1,474.80 | \$614.50 | \$776.21 |
| Subscriber \& Spouse | \$320.96 | \$385.15 | \$160.48 | \$1,231.10 | \$512.96 | \$647.95 |
| Subscriber \& Family | \$567.82 | \$681.38 | \$283.91 | \$1,865.90 | \$777.46 | \$982.05 |
|  |  |  |  |  |  |  |
|  | *PLEASE NOTE: The 10 pay and 19 pay rates assume the employee works the entire school year (September through June). If the employee begins work after the beginning of the school year, further adjustments will be necessary in order to have 12 months of coverage. |  |  |  |  |  |

