## 80/20 & 70/30 Plan for 12-Month RIF Subscribers

	Enhanced PPO Plan (80/20)		Base PPO Plan (70/30)	
<b>Monthly Premium Rates</b> January 1, 2024 – December 31, 2024	TOBACCO ATTESTATION COMPLETE?*		TOBACCO ATTESTATION COMPLETE?*	
	YES	NO	YES	NO
MEDICARE & NON-MEDICARE PRIMARY FOR 12-MONTH RIF SUBSCRIBERS				
Subscriber	\$50.00	\$110.00	\$25.00	\$85.00
Subscriber + Child(ren)	\$305.00	\$365.00	\$218.00	\$278.00
Subscriber + Spouse	\$700.00	\$760.00	\$590.00	\$650.00
Subscriber + Family	\$720.00	\$780.00	\$598.00	\$658.00
MEDICARE PRIMARY FOR DEPENDENTS ONLY				
Subscriber + Child(ren)	\$205.00	\$265.00	\$180.00	\$240.00
Subscriber + Spouse	\$475.00	\$535.00	\$450.00	\$510.00
Subscriber + Family	\$494.00	\$554.00	\$469.00	\$529.00
MEDICARE PRIMARY FOR SUBSCRIBER AND DEPENDENT(S)				
Subscriber + Child(ren)	\$205.00	\$265.00	\$180.00	\$240.00
Subscriber + Spouse	\$475.00	\$535.00	\$450.00	\$510.00
Subscriber + Family	\$494.00	\$554.00	\$469.00	\$529.00

## Notes:

1. The employer share for 12-month RIF subscribers is \$674.54

