80/20 & 70/30 Plan for Active Employees Whose Dependent is Medicare Primary Due to ESRD

| Monthly Premium Rates January 1, 2021 – December 31, 2021 | 80/20 PLAN | | 70/30 PLAN | |
|---|-----------------------------------|------------|-----------------------------------|------------|
| | TOBACCO ATTESTATION COMPLETE?* | | TOBACCO ATTESTATION COMPLETE?* | |
| | YES | NO | YES | NO |
| ACTIVE SUBSCRIBERS WITH ESRD DEPENDENT | | | | |
| 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 |
| ACTIVE SUBSCRIBERS (50% CONTRIBUTORY) | | | | |
| Subscriber + Child(ren) | \$465.98 | \$525.98 | \$440.98 | \$500.98 |
| Subscriber + Spouse | \$735.98 | \$795.98 | \$710.98 | \$770.98 |
| Subscriber + Family | \$754.98 | \$814.98 | \$729.98 | \$789.98 |
| ACTIVE SUBSCRIBERS (COBRA & 100% CONTRIBUTORY) | | | | |
| Subscriber + Child(ren) | \$726.96 | \$786.96 | \$701.96 | \$761.96 |
| Subscriber + Spouse | \$996.96 | \$1,056.96 | \$971.96 | \$1,031.96 |
| Subscriber + Family | \$1,015.96 | \$1,075.96 | \$990.96 | \$1,050.96 |

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 work for a local government employer, contact your Health Benefits Representative or benefits office for monthly rates.

3. The employer share for Active subscribers is \$521.96, or \$260.98 for 50% Contributory Active Subscribers.

*Premium credit completed during enrollment period

