

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

Monthly Premium Rates January 1, 2024 – December 31, 2024	Enhanced PPO Plan (80/20)		Base PPO Plan (70/30)	
	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)	\$542.27	\$602.27	\$517.27	\$577.27
Subscriber + Spouse	\$812.27	\$872.27	\$787.27	\$847.27
Subscriber + Family	\$831.27	\$891.27	\$806.27	\$866.27
ACTIVE SUBSCRIBERS (COBRA & 100% CONTRIBUTORY)				
Subscriber + Child(ren)	\$879.54	\$939.54	\$854.54	\$914.54
Subscriber + Spouse	\$1,149.54	\$1,209.54	\$1,124.54	\$1,184.54
Subscriber + Family	\$1,168.54	\$1,228.54	\$1,143.54	\$1,203.54

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 \$674.54 or \$337.27 for 50% Contributory Active Subscribers.

*Premium credit completed during enrollment period