DEPARTMENT OF CIVIL SERVICE
EMPLOYEE BENEFITS DIVISION
FY 2005-2006 HEALTH INSURANCE PREMIUM RATES
(Effective October 9, 2005)

		BIWEEKLY			ANNUAL			BIWEEKLY - PART TIME *1		ANNUAL - PART TIME *1		MONTHLY (CGIS)	
PLAN NAME/CODE	**Option *2**	**Employee**	**State**	**Total**	**Employee**	**State**	**Total**	**Employee**	**State**	**Employee**	**State**	**Leave/LO**	**COBRA**
HAEX State Health Plan	1	$ 10.45	$ 198.54	$ 208.99	$ 271.69	$ 5,162.05	$ 5,433.74	$ 104.50	$ 104.50	$ 2,716.87	$ 2,716.87	$ 452.81	$ 461.87
	2	$ 20.90	$ 397.09	$ 417.98	$ 543.38	$ 10,324.22	$ 10,867.60	$ 208.99	$ 208.99	$ 5,433.80	$ 5,433.80	$ 905.63	$ 923.75
	3	$ 18.39	$ 349.43	$ 367.83	$ 478.17	$ 9,085.29	$ 9,563.46	$ 183.91	$ 183.91	$ 4,781.73	$ 4,781.73	$ 796.96	$ 812.89
	4	$ 28.84	$ 547.97	$ 576.82	$ 749.86	$ 14,247.34	$ 14,997.20	$ 288.41	$ 288.41	$ 7,498.60	$ 7,498.60	$ 1,249.77	$ 1,274.76
Employee or Spouse	5	$ -	$ 198.54	$ 198.54	$ -	$ 5,162.05	$ 5,162.05	$ -	$ -	$ -	$ -	$ 430.17	$ 438.77
with Medicare	6	$ -	$ 397.09	$ 397.09	$ -	$ 10,324.22	$ 10,324.22	$ -	$ -	$ -	$ -	$ 860.35	$ 877.56
(State Pays 100%)	7	$ -	$ 349.43	$ 349.43	$ -	$ 9,085.29	$ 9,085.29	$ -	$ -	$ -	$ -	$ 757.11	$ 772.25
	8	$ -	$ 547.97	$ 547.97	$ -	$ 14,247.34	$ 14,247.34	$ -	$ -	$ -	$ -	$ 1,187.28	$ 1,211.02
H2F0 Catastrophic Health	1	$ -	$ 15.81	$ 15.81	$ -	$ 411.06	$ 411.06	$ 7.91	$ 7.91	$ 205.53	$ 205.53	$ 34.26	$ 34.94
Plan *3	2	$ -	$ 31.62	$ 31.62	$ -	$ 822.12	$ 822.12	$ 15.81	$ 15.81	$ 411.06	$ 411.06	$ 68.51	$ 69.88
(State pays 100%)	3	$ -	$ 31.62	$ 31.62	$ -	$ 822.12	$ 822.12	$ 15.81	$ 15.81	$ 411.06	$ 411.06	$ 68.51	$ 69.88
	4	$ -	$ 31.62	$ 31.62	$ -	$ 822.12	$ 822.12	$ 15.81	$ 15.81	$ 411.06	$ 411.06	$ 68.51	$ 69.88
H3ZN Decline Health Ins.	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)
H4ZN "Opt Out" Health *4	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)

*1 Part-time employees hired after 1/1/2000 (1/1/2002 for bargaining units A02 and A31) whose regular work schedule is 40 hours or less per biweekly pay period pay premiums according to column (d).
*2 Health, dental and vision option codes are: 1 = Employee only coverage, 2 = Employee & Spouse, 3 = Employee & Child(ren), 4 = Full Family.
*3 Enrollees in the Catastrophic Health Plan will receive a $50.00 rebate with each paycheck beginning October 20, 2005.
*4 Employees who opt out of health or dental coverage (because they have "primary" coverage through a non-State employee or non-State retired spouse" will receive a rebate identical to the Catastrophic Health or Preventive Dental Plan