

**OFFICE OF THE STATE EMPLOYER  
EMPLOYEE HEALTH MANAGEMENT  
FY 2014-2015 LONG TERM DISABILITY INSURANCE PREMIUM RATES  
Rates Per \$100 of Earnings\*  
(EFFECTIVE OCTOBER 12, 2014)**

\*Benefits are subject to maximums as defined in the LTD Plan Booklet.

PLAN NAME/CODE	Status	Employee	State
	(a)	(b)	(c)
<b>All employees except those represented by UAW</b>			
YIA0: Less than 184 hours sick leave	Plan I	\$1.56	\$0.79
YIA1: 184-527 hours sick leave	Plan IIA	\$0.40	\$0.79
YIA2: 528 hours or more sick leave	Plan IIB	\$0.00	\$0.79
YIA3: Reach Plan II (YIA1) but now less than 184 hours sick leave	Plan IIC	\$1.30	\$0.79
<b>Employees represented by UAW</b>			
YIA0: Less than 184 hours sick leave	Plan I	\$1.59	\$0.79
YIA1: 184-527 hours sick leave	Plan IIA	\$0.43	\$0.79
YIA2: 528 hours or more sick leave	Plan IIB	\$0.00	\$0.79
YIA3: Reach Plan II (YIA1) but now less than 184 hours sick leave	Plan IIC	\$1.34	\$0.79
<b>Calculation of Employee Contribution:</b>			
Bi-weekly Contribution = Hourly Rate times 2088, divided by 26, divided by 100, times the Employee Rate per Plan (I, IIA, IIB, or IIC)			