

**CIVIL SERVICE COMMISSION
EMPLOYEE BENEFITS DIVISION
FY 2014-2015 T01 DROP GROUP INSURANCE PREMIUM RATES
(EFFECTIVE OCTOBER 12, 2014)**

HEALTH PLANS				
PLAN NAME/CODE	Option	BIWEEKLY		
		Employee	State	Total
(HAEX) State Health Plan PPO	Employee Only	\$ 16.95	\$ 322.00	\$ 338.95
	Employee & Spouse	\$ 33.89	\$ 643.99	\$ 677.88
	Employee & Child (ren)	\$ 21.35	\$ 405.60	\$ 426.95
	Full Family	\$ 39.24	\$ 745.49	\$ 784.73

(HBCN) Blue Care Network	Employee Only	\$ 118.74	\$ 322.00	\$ 440.74
	Employee & Spouse	\$ 237.49	\$ 643.99	\$ 881.48
	Employee & Child (ren)	\$ 149.73	\$ 405.60	\$ 555.33
	Full Family	\$ 277.03	\$ 745.49	\$ 1,022.52

(HCOP) COPS Trust Health Plan (For T01 only)	Employee Only	\$ 56.73	\$ 256.30	\$ 313.03
	Employee & Spouse	\$ 113.52	\$ 512.59	\$ 626.11
	Employee & Child (ren)	\$ 99.87	\$ 451.08	\$ 550.95
	Full Family	\$ 156.64	\$ 707.38	\$ 864.02

(HI00) Health Alliance Plan	Employee Only	\$ 143.88	\$ 322.00	\$ 465.89
	Employee & Spouse	\$ 287.76	\$ 643.99	\$ 931.75
	Employee & Child (ren)	\$ 181.42	\$ 405.60	\$ 587.02
	Full Family	\$ 335.34	\$ 745.49	\$ 1,080.83

(HJ00) HealthPlus of Michigan	Employee Only	\$ 130.67	\$ 322.00	\$ 452.67
	Employee & Spouse	\$ 261.35	\$ 643.99	\$ 905.34
	Employee & Child (ren)	\$ 164.76	\$ 405.60	\$ 570.36
	Full Family	\$ 304.70	\$ 745.49	\$ 1,050.18

(HMEX) Physicians Health Plan	Employee Only	\$ 200.95	\$ 322.00	\$ 522.96
	Employee & Spouse	\$ 401.90	\$ 643.99	\$ 1,045.89
	Employee & Child (ren)	\$ 253.11	\$ 405.60	\$ 658.71
	Full Family	\$ 465.29	\$ 745.49	\$ 1,210.78

(HPRI) Priority Health Plan	Employee Only	\$ 168.50	\$ 322.00	\$ 490.50
	Employee & Spouse	\$ 336.03	\$ 643.99	\$ 980.02
	Employee & Child (ren)	\$ 211.79	\$ 405.60	\$ 617.39
	Full Family	\$ 391.29	\$ 745.49	\$ 1,136.78

STATE DENTAL PLAN				
Option	BIWEEKLY			
	Employee	State	Total	
Employee Only	\$ 2.02	\$ 18.13	\$ 20.15	
Employee & Spouse	\$ 3.67	\$ 33.04	\$ 36.71	
Employee & Child (ren)	\$ 4.49	\$ 40.36	\$ 44.85	
Full Family	\$ 6.14	\$ 55.27	\$ 61.41	

STATE VISION PLAN				
Option	BIWEEKLY			
	Employee	State	Total	
Employee Only	\$ 0.30	\$ 2.64	\$ 2.94	
Employee & Spouse	\$ 0.48	\$ 4.30	\$ 4.78	
Employee & Child (ren)	\$ 0.67	\$ 6.02	\$ 6.69	
Full Family	\$ 0.85	\$ 7.68	\$ 8.53	