## CIVIL SERVICE COMMISSION - EMPLOYEE BENEFITS DIVISION FY2021 GROUP INSURANCE PREMIUM RATES

## **MONTHLY RETIREE COBRA RATES - EFFECTIVE OCTOBER 1, 2020**

Plan Name	Option	Retiree
BCBSM State Health Plan PPO - w/o Medicare	Self	\$916.57
	Self and Spouse	\$1,833.15
	Self and Child(ren)	\$1,154.56
	Self, Spouse and Child(ren)	\$2,122.08
	Option	Retiree
BCBSM State Health Plan PPO - w/ Medicare Parts A&B	Self	\$480.59
	Self and Spouse	\$961.18
	Self and Child(ren)	\$718.58
	Self, Spouse and Child(ren)	\$1,250.17
	Option	Retiree
BCBSM State Health Plan PPO - 1 w/ Medicare, 1 w/o	Self w/o Medicare, Spouse w/Medicare	\$1,397.18
	Self w/ Medicare, Spouse w/o Medicare	\$1,397.18
	Self w/o Medicare, Spouse w/Medicare & Child(ren)	\$1,686.14
	Self w/ Medicare, Spouse w/o Medicare & Child(ren)	\$1,686.14
Plan Name	Option	Retiree
State Dental Plan	Self	\$50.03
	Self and Spouse	\$91.15
	Self and Child(ren)	\$111.34
	Self, Spouse and Child(ren)	\$152.48
Plan Name	Option	Retiree
State Vision Plan	Self	\$5.52
	Self and Spouse	\$8.98
	Self and Child(ren)	\$12.56
	Self, Spouse and Child(ren)	\$16.02
Plan Name	Option	Retiree
Blue Care Network HMO - w/o Medicare	Self	\$1,093.31
	Self and Spouse	\$2,186.61
	Self and Child(ren)	\$1,395.05
	Self, Spouse and Child(ren)	\$2,488.36
	Option	Retiree
Blue Care Network HMO - w/ Medicare Parts A&B	Self	\$271.79
	Self and Spouse	\$543.58
	Self and Child(ren)	\$573.54
	Self, Spouse and Child(ren)	\$845.33
	Option	Retiree
Blue Care Network HMO - 1 w/ Medicare, 1 w/o	Self w/o Medicare, Spouse w/Medicare	\$1,365.10
	Self w/ Medicare, Spouse w/o Medicare	\$1,365.10
	Self w/o Medicare, Spouse w/Medicare & Child(ren)	\$1,666.84

## CIVIL SERVICE COMMISSION - EMPLOYEE BENEFITS DIVISION FY2021 GROUP INSURANCE PREMIUM RATES

## MONTHLY RETIREE COBRA RATES – EFFECTIVE OCTOBER 1, 2020

Plan Name	Option	Retiree
Health Alliance Plan HMO - w/o Medicare	Self	\$1,351.96
	Self and Spouse	\$2,703.92
	Self and Child(ren)	\$1,703.46
	Self, Spouse and Child(ren)	\$3,055.42
	Option	Retiree
Health Alliance Plan HMO - w/ Medicare Parts A&B	Self	\$377.53
	Self and Spouse	\$755.07
	Self and Child(ren)	\$729.03
	Self, Spouse and Child(ren)	\$1,106.57
	Option	Retiree
Health Alliance Plan HMO - 1 w/ Medicare, 1 w/o	Self w/o Medicare, Spouse w/Medicare	\$1,729.49
	Self w/ Medicare, Spouse w/o Medicare	\$1,729.49
	Self w/o Medicare, Spouse w/Medicare & Child(ren)	\$2,080.99
	Self w/ Medicare, Spouse w/o Medicare & Child(ren)	\$2,080.99
Plan Name	Option	Retiree
Physicians Health Plan - HMO - w/o Medicare	Self	\$1,331.26
	Self and Spouse	\$2,662.53
	Self and Child(ren)	\$1,677.39
	Self, Spouse and Child(ren)	\$3,008.64
	Option	Retiree
Physicians Health Plan HMO - w/ Medicare Parts A&B	Self	\$363.12
	Self and Spouse	\$726.24
	Self and Child(ren)	\$709.25
	Self, Spouse and Child(ren)  Option	\$1,072.37
		Retiree
Physicians Health Plan HMO - 1 w/ Medicare, 1 w/o	Self w/o Medicare, Spouse w/Medicare	\$1,694.38
	Self w/ Medicare, Spouse w/o Medicare	\$1,694.38
	Self w/o Medicare, Spouse w/Medicare & Child(ren)	\$2,040.51
	Self w/ Medicare, Spouse w/o Medicare & Child(ren)	\$2,040.51
Plan Name	Option	Retiree
Priority Health Plan HMO - w/o Medicare	Self	\$1,428.29
	Self and Spouse	\$2,856.57
	Self and Child(ren)	\$1,797.78
	Self, Spouse and Child(ren)	\$3,226.07
	Option	Retiree
Priority Health Plan HMO - w/ Medicare Parts A&B	Self	\$311.10
	Self and Spouse	\$622.20
	Self and Child(ren)	\$680.60
	Self, Spouse and Child(ren)	\$991.70
	Option	Retiree
Priority Health Plan HMO - 1 w/ Medicare, 1 w/o	Self w/o Medicare, Spouse w/Medicare	\$1,739.39
	Self w/ Medicare, Spouse w/o Medicare	\$1,739.39
	Self w/o Medicare, Spouse w/Medicare & Child(ren)	\$2,108.88
	Self w/ Medicare, Spouse w/o Medicare & Child(ren)	\$2,108.88