



Employer Alert

April 2016

OFFICE OF PENSIONS

Health Care Rates: Non-Medicare Health Plans for SEPP Retirees

Health Care Rates will be changing for the Non-Medicare health plans effective 7/1/16. Please refer to the chart for rates effective 7/1/16 through 6/30/17.

State Share (the amount the State pays) Percentages:

Eligible Pensioners Hired By The State On Or After July 1, 1991 Through December 31, 2006 (Except those receiving a disability pension or receiving an LTD benefit from The Hartford)			
Less than 10 years			0%
10 years less than 15 years			50%
15 years less than 20 years			75%
20 years or more			100%
Eligible Pensioners Hired By The State On Or After January 1, 2007 (Except those receiving a disability pension or receiving an LTD benefit from The Hartford)			
Less than 15 years			0%
15 years less than 17.5 years			50%
17.5 years less than 20 years			75%
20 years or more			100%

July 2016 Rates (Non-Medicare)

Effective 7/1/16 - 6/30/17

FIRST STATE BASIC-100%					FIRST STATE BASIC-75%					FIRST STATE BASIC-50%					FIRST STATE BASIC-0%								
			TOTAL COST	STATE SHARE	PENR SHARE				TOTAL COST	STATE SHARE	PENR SHARE				TOTAL COST	STATE SHARE	PENR SHARE				TOTAL COST	STATE SHARE	PENR SHARE
Individual			696.36	667.52	27.84				696.36	500.64	194.72				696.36	333.78	361.60				696.36	0.00	696.36
Individual & Spouse			1438.68	1381.16	57.52				1438.68	1035.87	402.81				1438.68	690.58	748.10				1438.68	0.00	1438.68
Individual & Child(ren)			1057.02	1014.76	42.26				1057.02	761.07	295.95				1057.02	507.38	549.64				1057.02	0.00	1057.02
Family			1798.42	1726.50	71.92				1798.42	1294.88	503.54				1798.42	863.25	935.17				1798.42	0.00	1798.42
BLUE CARE-100%					BLUE CARE-75%					BLUE CARE-50%					BLUE CARE-0%								
Individual			726.52	679.34	47.18				726.52	509.51	217.01				726.52	339.67	386.85				726.52	0.00	726.52
Individual & Spouse			1535.42	1435.62	99.80				1535.42	1076.72	458.70				1535.42	717.81	817.61				1535.42	0.00	1535.42
Individual & Child(ren)			1111.64	1039.38	72.26				1111.64	779.54	332.10				1111.64	519.69	591.95				1111.64	0.00	1111.64
Family			1915.68	1791.16	124.52				1915.68	1343.37	572.31				1915.68	895.58	1020.10				1915.68	0.00	1915.68
BCBS GOLD-100%					BCBS GOLD-75%					BCBS GOLD-50%					BCBS GOLD-0%								
Individual			719.68	683.70	35.98				719.68	512.78	206.90				719.68	341.85	377.83				719.68	0.00	719.68
Individual & Spouse			1492.22	1417.64	74.58				1492.22	1063.23	428.99				1492.22	708.82	783.40				1492.22	0.00	1492.22
Individual & Child(ren)			1099.56	1044.60	54.96				1099.56	783.45	316.11				1099.56	522.30	577.26				1099.56	0.00	1099.56
Family			1895.74	1800.96	94.78				1895.74	1350.72	545.02				1895.74	900.48	995.26				1895.74	0.00	1895.74
COMP PPO-100%					COMPREHENSIVE-75%					COMPREHENSIVE-50%					COMPREHENSIVE-0%								
Individual			793.86	688.68	105.18				793.86	516.51	277.35				793.86	344.34	449.52				793.86	0.00	793.86
Individual & Spouse			1647.34	1429.08	218.26				1647.34	1071.81	575.53				1647.34	714.54	932.80				1647.34	0.00	1647.34
Individual & Child(ren)			1223.46	1061.38	162.08				1223.46	796.04	427.42				1223.46	530.69	692.77				1223.46	0.00	1223.46
Family			2059.40	1786.54	272.86				2059.40	1339.91	719.49				2059.40	893.27	1166.13				2059.40	0.00	2059.40
AETNA-100%					AETNA-75%					AETNA-50%					AETNA-0%								
Individual			725.94	678.78	47.16				725.94	509.09	216.85				725.94	339.39	386.55				725.94	0.00	725.94
Individual & Spouse			1530.58	1431.08	99.50				1530.58	1073.31	457.27				1530.58	715.54	815.04				1530.58	0.00	1530.58
Individual & Child(ren)			1110.52	1038.34	72.18				1110.52	778.76	331.76				1110.52	519.17	591.35				1110.52	0.00	1110.52
Family			1909.82	1785.70	124.12				1909.82	1339.28	570.54				1909.82	892.85	1016.97				1909.82	0.00	1909.82
AETNA GOLD-100%					AETNA GOLD-75%					AETNA GOLD-50%					AETNA GOLD-0%								
Individual			719.68	683.70	35.98				719.68	512.78	206.90				719.68	341.85	377.83				719.68	0.00	719.68
Individual & Spouse			1492.22	1417.64	74.58				1492.22	1063.23	428.99				1492.22	708.82	783.40				1492.22	0.00	1492.22
Individual & Child(ren)			1099.56	1044.60	54.96				1099.56	783.45	316.11				1099.56	522.30	577.26				1099.56	0.00	1099.56
Family			1895.74	1800.96	94.78				1895.74	1350.72	545.02				1895.74	900.48	995.26				1895.74	0.00	1895.74



Double State Share Rates

AETNA DSS			TOTAL COST	STATE SHARE	PENR SHARE
Individual			725.94	700.94	25.00
Individual & Spouse			1530.58	1505.58	25.00
Individual & Child(ren)			1110.52	1085.52	25.00
Family			1909.82	1884.82	25.00

COMPREHENSIVE DSS			TOTAL COST	STATE SHARE	PENR SHARE
			793.86	768.86	25.00
			1647.34	1622.34	25.00
			1223.46	1198.46	25.00
			2059.40	2034.40	25.00

BLUE CARE DSS			TOTAL COST	STATE SHARE	PENR SHARE
			726.52	701.52	25.00
			1535.42	1510.42	25.00
			1111.64	1086.64	25.00
			1915.68	1890.68	25.00

FIRST STATE BASIC DSS			TOTAL COST	STATE SHARE	PENR SHARE
			695.36	670.36	25.00
			1438.68	1413.68	25.00
			1057.02	1032.02	25.00
			1798.42	1773.42	25.00

AETNA GOLD DSS			TOTAL COST	STATE SHARE	PENR SHARE
Individual			719.68	694.68	25.00
Individual & Spouse			1492.22	1467.22	25.00
Individual & Child(ren)			1099.56	1074.56	25.00
Family			1895.74	1870.74	25.00

BCBS GOLD DSS			TOTAL COST	STATE SHARE	PENR SHARE
			719.68	694.68	25.00
			1492.22	1467.22	25.00
			1099.56	1074.56	25.00
			1895.74	1870.74	25.00

Dental & Vision Rates

Delta Dental			TOTAL COST	STATE SHARE	PENR SHARE
Individual			35.86	0	35.86
Individual & Spouse			73.18	0	73.18
Individual & Child(ren)			71.84	0	71.84
Family			119.88	0	119.88

Dominion Dental			TOTAL COST	STATE SHARE	PENR SHARE
			24.52	0	24.52
			45.62	0	45.62
			49.16	0	49.16
			66.76	0	66.76

EyeMed			TOTAL COST	STATE SHARE	PENR SHARE
			6.46	0	6.46
			10.20	0	10.20
			10.40	0	10.40
			16.78	0	16.78

If you have any questions or need clarification, please contact the Benefits Section at the Office of Pensions at 302-739-4208 or 1-800-722-7300.