

LOCAL GOVERNMENT RATES CY2018		BLUE CROSS BLUE SHIELD REGULAR						COBRA						
Rate		Preferred Rates			Standard Rates			Preferred Rates			Standard Rates			
		Employee Share	Dependent Share	Total	Employee Share	Dependent Share	Total	Employee Share	Dependent Share	Total	Employee Share	Dependent Share	Total	
Active Rates														
A	Active subscriber	\$ 450		\$ 450	\$ 492		\$ 492	\$ 459		\$ 459	\$ 501		\$ 501	
B	Active subscriber & dependent	\$ 450	\$ 647	\$ 1,097	\$ 492	\$ 749	\$ 1,241	\$ 459	\$ 659	\$ 1,118	\$ 501	\$ 763	\$ 1,264	
J	Active subscriber (no dental)	\$ 429		\$ 429	\$ 471		\$ 471	\$ 438		\$ 438	\$ 480		\$ 480	
K	Active subscriber & dependent (no dental)	\$ 429	\$ 616	\$ 1,045	\$ 471	\$ 718	\$ 1,189	\$ 438	\$ 628	\$ 1,066	\$ 480	\$ 732	\$ 1,212	
Retiree Rates														
		Retiree Share	Dependent Share	Total	Retiree Share	Dependent Share	Total	Retiree Share	Dependent Share	Total	Retiree Share	Dependent Share	Total	
H	Retired subscriber (not Medicare)	\$ 929		\$ 929	\$ 947		\$ 947	\$ 947		\$ 947	\$ 738		\$ 738	
I	Retired subscriber (not Medicare) & dependent (not Medicare)	\$ 929	\$ 782	\$ 1,711	\$ 947	\$ 797	\$ 1,744	\$ 947	\$ 797	\$ 1,744	\$ 738	\$ 763	\$ 1,501	
C	Retired subscriber (not Medicare) & dependent (Medicare)	\$ 929	\$ 459	\$ 1,388	\$ 947	\$ 468	\$ 1,415	\$ 947	\$ 468	\$ 1,415	\$ 707		\$ 707	
L	Retired subscriber (not Medicare) (no dental)	\$ 908		\$ 908	\$ 926		\$ 926	\$ 926		\$ 926	\$ 707		\$ 707	
M	Retired subscriber (not Medicare) & dependent (not Medicare) (no dental)	\$ 908	\$ 751	\$ 1,659	\$ 926	\$ 766	\$ 1,692	\$ 926	\$ 766	\$ 1,692	\$ 707	\$ 732	\$ 1,439	
N	Retired subscriber (not Medicare) & dependent (Medicare) (no dental)	\$ 908	\$ 428	\$ 1,336	\$ 926	\$ 437	\$ 1,363	\$ 926	\$ 437	\$ 1,363				
D	Retired subscriber (Medicare)	\$ 448		\$ 448	\$ 457		\$ 457	\$ 457		\$ 457				
E	Retired subscriber (Medicare) & dependent (not Medicare)	\$ 448	\$ 645	\$ 1,093	\$ 457	\$ 657	\$ 1,114	\$ 457	\$ 657	\$ 1,114				
F	Retired subscriber (Medicare) & dependent (Medicare)	\$ 448	\$ 459	\$ 907	\$ 457	\$ 468	\$ 925	\$ 457	\$ 468	\$ 925				
O	Retired subscriber (Medicare) (no dental)	\$ 427		\$ 427	\$ 436		\$ 436	\$ 436		\$ 436				
P	Retired subscriber (Medicare) & dependent (not Medicare) (no dental)	\$ 427	\$ 614	\$ 1,041	\$ 436	\$ 626	\$ 1,062	\$ 436	\$ 626	\$ 1,062				
Q	Retired subscriber (Medicare) & dependent (Medicare) (no dental)	\$ 427	\$ 428	\$ 855	\$ 436	\$ 437	\$ 873	\$ 436	\$ 437	\$ 873				
U	COBRA Disabled (Single)				\$ 675		\$ 675	\$ 675		\$ 675	\$ 738		\$ 738	
W	COBRA Disabled (Family)				\$ 675	\$ 659	\$ 1,334	\$ 675	\$ 659	\$ 1,334	\$ 738	\$ 763	\$ 1,501	
U	COBRA Disabled (Single) (no dental)				\$ 644		\$ 644	\$ 644		\$ 644	\$ 707		\$ 707	
W	COBRA Disabled (Family) (no dental)				\$ 644	\$ 628	\$ 1,272	\$ 644	\$ 628	\$ 1,272	\$ 707	\$ 732	\$ 1,439	

		SOUTHLAND			
		Employee Share	Dependent Share	Total	
	Vision	\$ 20		\$ 20	
	Dental	\$ 40		\$ 40	

COBRA			
	Employee Share	Dependent Share	Total
	\$ 20		\$ 20
	\$ 41		\$ 41