

**Local Government Health Insurance Program
CY2022 Premiums**

Active Employee Premiums - Preferred			
	Single	Family	Total
Employee (dental)	\$551		\$551
Employee & dependent (dental)	\$551	\$796	\$1,347
Employee (no dental)	\$527		\$527
Employee & dependent (no dental)	\$527	\$759	\$1,286

Active Employee Premiums - Standard			
	Single	Family	Total
Employee (dental)	\$604		\$604
Employee & dependent (dental)	\$604	\$922	\$1,526
Employee (no dental)	\$580		\$580
Employee & dependent (no dental)	\$580	\$885	\$1,465

Retiree (not Medicare)			
	Single	Family	Total
Retiree (not Medicare) (dental)	\$1,141		\$1,141
Retiree (not Medicare) & dependent (not Medicare) (dental)	\$1,141	\$963	\$2,104
Retiree (not Medicare) & dependent (Medicare) (dental)	\$1,141	\$199	\$1,340
Retiree (not Medicare) & 2 dependents (Medicare) (dental)	\$1,141	\$398	\$1,539
Retiree (not Medicare) (no dental)	\$1,117		\$1,117
Retiree (not Medicare) & dependent (not Medicare) (no dental)	\$1,117	\$926	\$2,043
Retiree (not Medicare) & dependent (Medicare) (no dental)	\$1,117	\$175	\$1,292
Retiree (not Medicare) & 2 dependents (Medicare) (no dental)	\$1,117	\$350	\$1,467

Retiree (Medicare)			
	Single	Family	Total
Retiree (Medicare) (dental)	\$199		\$199
Retiree (Medicare) & dependent (not Medicare) (dental)	\$199	\$793	\$992
Retiree (Medicare) & dependent (Medicare) (dental)	\$199	\$199	\$398
Retiree (Medicare) & 2 dependents (Medicare) (dental)	\$199	\$398	\$597
Retiree (Medicare) (no dental)	\$175		\$175
Retiree (Medicare) & dependent (not Medicare) (no dental)	\$175	\$756	\$931
Retiree (Medicare) & dependent (Medicare) (no dental)	\$175	\$175	\$350
Retiree (Medicare) & 2 dependents (Medicare) (no dental)	\$175	\$350	\$525

COBRA - Preferred			
	Single	Family	Total
Employee (dental)	\$562		\$562
Medicare employee (dental)	\$203		\$203
Employee & dependent (not Medicare) (dental)	\$562	\$812	\$1,374
Medicare employee & dependent (not Medicare) (dental)	\$203	\$812	\$1,015
Medicare employee & dependent (Medicare) (dental)	\$203	\$203	\$406
Employee & dependent (Medicare) (dental)	\$562	\$203	\$765
Employee (no dental)	\$538		\$538
Medicare employee (no dental)	\$179		\$179
Employee & dependent (not Medicare) (no dental)	\$538	\$774	\$1,312
Medicare employee & dependent (not Medicare) (no dental)	\$179	\$774	\$953
Medicare employee & dependent (Medicare) (no dental)	\$179	\$179	\$358
Employee & dependent (Medicare) (no dental)	\$538	\$179	\$717

COBRA - Standard			
	Single	Family	Total
Employee (dental)	\$616		\$616
Medicare employee (dental)	\$203		\$203
Employee & dependent (not Medicare) (dental)	\$616	\$940	\$1,556
Medicare employee & dependent (not Medicare) (dental)	\$203	\$940	\$1,143
Medicare employee & dependent (Medicare) (dental)	\$203	\$203	\$406
Employee & dependent (Medicare) (dental)	\$616	\$203	\$819
Employee (no dental)	\$592		\$592
Medicare employee (no dental)	\$179		\$179
Employee & dependent (not Medicare) (no dental)	\$592	\$903	\$1,495
Medicare employee & dependent (not Medicare) (no dental)	\$179	\$903	\$1,082
Medicare employee & dependent (Medicare) (no dental)	\$179	\$179	\$358
Employee & dependent (Medicare) (no dental)	\$592	\$179	\$771

Retiree (not Medicare) COBRA			
	Single	Family	Total
Retiree (not Medicare) (dental)	\$1,164		\$1,164
Retiree (not Medicare) & dependent (not Medicare) (dental)	\$1,164	\$982	\$2,146
Retiree (not Medicare) & dependent (Medicare) (dental)	\$1,164	\$203	\$1,367
Retiree (not Medicare) & 2 dependents (Medicare) (dental)	\$1,164	\$406	\$1,570
Retiree (not Medicare) (no dental)	\$1,139		\$1,139
Retiree (not Medicare) & dependent (not Medicare) (no dental)	\$1,139	\$945	\$2,084
Retiree (not Medicare) & dependent (Medicare) (no dental)	\$1,139	\$179	\$1,318
Retiree (not Medicare) & 2 dependents (Medicare) (no dental)	\$1,139	\$357	\$1,496

Retiree (Medicare) COBRA			
	Single	Family	Total
Retiree (Medicare) (dental)	\$203		\$203
Retiree (Medicare) & dependent (not Medicare) (dental)	\$203	\$809	\$1,012
Retiree (Medicare) & dependent (Medicare) (dental)	\$203	\$203	\$406
Retiree (Medicare) & 2 dependents (Medicare) (dental)	\$203	\$406	\$609
Retiree (Medicare) (no dental)	\$179		\$179
Retiree (Medicare) & dependent (not Medicare) (no dental)	\$179	\$771	\$950
Retiree (Medicare) & dependent (Medicare) (no dental)	\$179	\$179	\$358
Retiree (Medicare) & 2 dependents (Medicare) (no dental)	\$179	\$357	\$536

COBRA Disabled - Preferred			
	Single	Family	Total
COBRA Disabled (dental)	\$827		\$827
COBRA Disabled Medicare (dental)	\$299		\$299
COBRA Disabled & dependent (dental)	\$827	\$812	\$1,639
COBRA Disabled Medicare & dependent (dental)	\$299	\$812	\$1,111
COBRA Disabled & dependent (Medicare) (dental)	\$827	\$203	\$1,030
COBRA Disabled Medicare & dependent (Medicare) (dental)	\$299	\$203	\$502
COBRA Disabled (no dental)	\$791		\$791
COBRA Disabled Medicare (no dental)	\$263		\$263
COBRA Disabled & dependent (no dental)	\$791	\$774	\$1,565
COBRA Disabled Medicare & dependent (no dental)	\$263	\$774	\$1,037
COBRA Disabled & dependent (Medicare) (no dental)	\$791	\$179	\$970
COBRA Disabled Medicare & dependent (Medicare) (no dental)	\$263	\$179	\$442

COBRA Disabled - Standard			
	Single	Family	Total
COBRA Disabled (dental)	\$906		\$906
COBRA Disabled Medicare (dental)	\$299		\$299
COBRA Disabled & dependent (dental)	\$906	\$940	\$1,846
COBRA Disabled Medicare & dependent (dental)	\$299	\$940	\$1,239
COBRA Disabled & dependent (Medicare) (dental)	\$906	\$203	\$1,109
COBRA Disabled Medicare & dependent (Medicare) (dental)	\$299	\$203	\$502
COBRA Disabled (no dental)	\$870		\$870
COBRA Disabled Medicare (no dental)	\$263		\$263
COBRA Disabled & dependent (no dental)	\$870	\$903	\$1,773
COBRA Disabled Medicare & dependent (no dental)	\$263	\$903	\$1,166
COBRA Disabled & dependent (Medicare) (no dental)	\$870	\$179	\$1,049
COBRA Disabled Medicare & dependent (Medicare) (no dental)	\$263	\$179	\$442

Southland			
	Single	Family	Total
Vision	\$12	\$20	\$20
Dental	\$44	\$44	\$44

Southland - COBRA			
	Single	Family	Total
Vision	\$12	\$20	\$20
Dental	\$46	\$46	\$46