

Public School Employees - Actives
October 1, 2005 Self-Insured Premium Rates (HRA Adjusted)

	Medical	Behavioral/EAP	Prescription Drug	Retirement Subsidy	Total Monthly Premium	School Contribution	HB1559 Contribution	Total Monthly Employee Cost	**HRA Completion Employee (or Spouse)	**HRA Completion Employee and Spouse
Employee Only										
BCBS PPO	\$288.60	\$4.46	\$66.82	\$11.20	\$371.08	(\$131.00)	(\$52.76)	\$187.32	\$177.32	
NovaSys PPO	\$278.52	\$4.46	\$66.82	\$11.20	\$361.00	(\$131.00)	(\$52.76)	\$177.24	\$167.24	
Health Advantage POS	\$230.28	\$4.46	\$66.82	\$11.20	\$312.76	(\$131.00)	(\$52.76)	\$129.00	\$119.00	
NovaSys POS	\$220.80	\$4.46	\$66.82	\$11.20	\$303.28	(\$131.00)	(\$52.76)	\$119.52	\$109.52	
QualChoice POS	\$241.80	\$4.46	\$66.82	\$11.20	\$324.28	(\$131.00)	(\$52.76)	\$140.52	\$130.52	
Health Advantage HMO	\$220.90	\$4.46	\$66.82	\$11.20	\$303.38	(\$131.00)	(\$52.76)	\$119.62	\$109.62	
NovaSys HMO	\$210.94	\$4.46	\$66.82	\$11.20	\$293.42	(\$131.00)	(\$52.76)	\$109.66	\$99.66	
QualChoice HMO	\$223.74	\$4.46	\$66.82	\$11.20	\$306.22	(\$131.00)	(\$52.76)	\$122.46	\$112.46	
*NovaSys HD PPO	\$198.81	\$4.46	\$43.11	\$11.20	\$257.58	(\$131.00)	(\$52.76)	\$73.82	\$63.82	
Employee & Spouse										
BCBS PPO	\$797.31	\$8.92	\$180.11	\$11.20	\$997.54	(\$131.00)	(\$93.80)	\$772.74	\$762.74	\$752.74
NovaSys PPO	\$787.23	\$8.92	\$180.11	\$11.20	\$987.46	(\$131.00)	(\$93.80)	\$762.66	\$752.66	\$742.66
Health Advantage POS	\$634.55	\$8.92	\$180.11	\$11.20	\$834.78	(\$131.00)	(\$93.80)	\$609.98	\$599.98	\$589.98
NovaSys POS	\$625.07	\$8.92	\$180.11	\$11.20	\$825.30	(\$131.00)	(\$93.80)	\$600.50	\$590.50	\$580.50
QualChoice POS	\$666.65	\$8.92	\$180.11	\$11.20	\$866.88	(\$131.00)	(\$93.80)	\$642.08	\$632.08	\$622.08
Health Advantage HMO	\$608.43	\$8.92	\$180.11	\$11.20	\$808.66	(\$131.00)	(\$93.80)	\$583.86	\$573.86	\$563.86
NovaSys HMO	\$598.47	\$8.92	\$180.11	\$11.20	\$798.70	(\$131.00)	(\$93.80)	\$573.90	\$563.90	\$553.90
QualChoice HMO	\$616.27	\$8.92	\$180.11	\$11.20	\$816.50	(\$131.00)	(\$93.80)	\$591.70	\$581.70	\$571.70
*NovaSys HD PPO	\$532.31	\$8.92	\$116.95	\$11.20	\$669.38	(\$131.00)	(\$93.80)	\$444.58	\$434.58	\$424.58
Employee & Child(ren)										
BCBS PPO	\$511.48	\$7.13	\$117.45	\$11.20	\$647.26	(\$131.00)	(\$71.86)	\$444.40	\$434.40	
NovaSys PPO	\$501.42	\$7.13	\$117.45	\$11.20	\$637.20	(\$131.00)	(\$71.86)	\$434.34	\$424.34	
Health Advantage POS	\$406.46	\$7.13	\$117.45	\$11.20	\$542.24	(\$131.00)	(\$71.86)	\$339.38	\$329.38	
NovaSys POS	\$397.00	\$7.13	\$117.45	\$11.20	\$532.78	(\$131.00)	(\$71.86)	\$329.92	\$319.92	
QualChoice POS	\$427.24	\$7.13	\$117.45	\$11.20	\$563.02	(\$131.00)	(\$71.86)	\$360.16	\$350.16	
Health Advantage HMO	\$389.64	\$7.13	\$117.45	\$11.20	\$525.42	(\$131.00)	(\$71.86)	\$322.56	\$312.56	
NovaSys HMO	\$379.66	\$7.13	\$117.45	\$11.20	\$515.44	(\$131.00)	(\$71.86)	\$312.58	\$302.58	
QualChoice HMO	\$394.66	\$7.13	\$117.45	\$11.20	\$530.44	(\$131.00)	(\$71.86)	\$327.58	\$317.58	
*NovaSys HD PPO	\$343.28	\$7.13	\$76.09	\$11.20	\$437.70	(\$131.00)	(\$71.86)	\$234.84	\$224.84	
Employee & Family										
BCBS PPO	\$800.07	\$14.71	\$180.76	\$11.20	\$1,006.74	(\$131.00)	(\$97.14)	\$778.60	\$768.60	\$758.60
NovaSys PPO	\$789.99	\$14.71	\$180.76	\$11.20	\$996.66	(\$131.00)	(\$97.14)	\$768.52	\$758.52	\$748.52
Health Advantage POS	\$636.75	\$14.71	\$180.76	\$11.20	\$843.42	(\$131.00)	(\$97.14)	\$615.28	\$605.28	\$595.28
NovaSys POS	\$627.27	\$14.71	\$180.76	\$11.20	\$833.94	(\$131.00)	(\$97.14)	\$605.80	\$595.80	\$585.80
QualChoice POS	\$668.99	\$14.71	\$180.76	\$11.20	\$875.66	(\$131.00)	(\$97.14)	\$647.52	\$637.52	\$627.52
Health Advantage HMO	\$610.55	\$14.71	\$180.76	\$11.20	\$817.22	(\$131.00)	(\$97.14)	\$589.08	\$579.08	\$569.08
NovaSys HMO	\$600.59	\$14.71	\$180.76	\$11.20	\$807.26	(\$131.00)	(\$97.14)	\$579.12	\$569.12	\$559.12
QualChoice HMO	\$618.41	\$14.71	\$180.76	\$11.20	\$825.08	(\$131.00)	(\$97.14)	\$596.94	\$586.94	\$576.94
*NovaSys HD PPO	\$533.20	\$14.71	\$117.15	\$11.20	\$676.26	(\$131.00)	(\$97.14)	\$448.12	\$438.12	\$428.12

* High Deductible PPO plan **no longer** requires a mandatory \$20 monthly Health Savings Account Contribution.

** Health Risk Assessment