

Traditional 70/30 Plan for Active Subscribers

Monthly Premium Rates January 1, 2017–December 31, 2017

PARTICIPATION IN WELLNESS ACTIVITIES		
WELLNESS ACTIVITIES	COMPLETED	NOT COMPLETED
Tobacco-free Attestation or QuitlineNC Enrollment	✓	
ACTIVE FOR SUBSCRIBER AND NON-MEDICARE PRIMARY FOR DEPENDENT(S)		
Subscriber Only	\$0.00	\$40.00
Subscriber + Child(ren)	\$218.14	\$258.14
Subscriber + Spouse	\$562.10	\$602.10
Subscriber + Family	\$598.70	\$638.70

Notes:

1. If your employment contract is for less than 12 months, contact your Health Benefits Representative or benefits office for monthly rates.
2. If you are actively employed and you or your dependent(s) are Medicare eligible, the State Health Plan is the primary insurer and the Non-Medicare rates apply. An exception to this would be if you or your dependent(s) are Medicare primary due to end stage renal disease (ESRD).
3. If you work for a local government employer, contact your Health Benefits Representative or benefits office for monthly rates.
4. The employer share for Active Subscribers is \$479.48.