

Traditional 70/30 Plan for Active Subscribers Who Are Medicare Primary Due to Upcoming Retirement or RIF

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

| PARTICIPATION IN WELLNESS ACTIVITIES | | |
|---|-----------|---------------|
| WELLNESS ACTIVITIES | COMPLETED | NOT COMPLETED |
| Tobacco-free Attestation or QuitlineNC Enrollment | ✓ | |
| MEDICARE PRIMARY FOR ACTIVE SUBSCRIBER ONLY | | |
| 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 |
| MEDICARE PRIMARY FOR ACTIVE SUBSCRIBER AND DEPENDENT(S) | | |
| Subscriber + Child(ren) | \$155.20 | \$195.20 |
| Subscriber + Spouse | \$408.08 | \$448.08 |
| Subscriber + Family | \$444.66 | \$484.66 |
| NON-MEDICARE PRIMARY FOR ACTIVE SUBSCRIBER AND MEDICARE PRIMARY FOR DEPENDENT(S) | | |
| Subscriber + Child(ren) | \$155.20 | \$195.20 |
| Subscriber + Spouse | \$408.08 | \$448.08 |
| Subscriber + Family | \$444.66 | \$484.66 |

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.