



## PUBLIC SCHOOL ACTIVE EMPLOYEES MONTHLY PREMIUMS WITH WELLNESS

2018 Plan Year Rates - Effective January 1, 2018 - December 31, 2018

	Base Monthly Premium	State and Plan Contribution	School District Contribution	Total Monthly Employee Cost
<b>Premium</b>				
Employee Only	\$584.28	\$243.32	\$229.76	\$111.20
Employee & Spouse	\$1,362.48	\$373.78	\$229.76	\$758.94
Employee & Child(ren)	\$1,022.96	\$394.92	\$229.76	\$398.28
Employee & Family	\$1,801.16	\$810.22	\$229.76	\$761.18
<b>Classic</b>				
Employee Only	\$284.04	\$80.52	\$203.52	\$0.00
Employee & Spouse	\$627.22	\$115.10	\$229.76	\$282.36
Employee & Child(ren)	\$477.50	\$161.58	\$229.76	\$86.16
Employee & Family	\$820.68	\$304.86	\$229.76	\$286.06
<b>Basic</b>				
Employee Only	\$168.76	\$0.00	\$168.76	\$0.00
Employee & Spouse	\$430.28	\$0.00	\$229.76	\$200.52
Employee & Child(ren)	\$279.36	\$0.00	\$229.76	\$49.60
Employee & Family	\$433.12	\$0.00	\$229.76	\$203.36
<b>The Basic plan meets the minimum essential coverage required under A.C.A.</b>				

State Contribution is funded by Act 1842 of 2005 and Act 1421 of 2009

Plan Contribution is funded by PSE Trust Fund as Claims Reserve Allocation