

	LSU FIRST The LSU System Health Plan OPTION 1			LSU FIRST The LSU System Health Plan OPTION 2			STATEWIDE PPO RATES JULY 1, 2011			Nationwide HMO RATES JULY 1, 2011			Nationwide CDHP w/H S A JULY 1, 2011			Statewide REGION 9 MEDICAL HOME HEALTH PLAN July 1, 2011			Statewide REGION 6,7,8 & 9 REGIONAL HMO July 1, 2011		
	STATE SHARE	EMP SHARE	TOTAL	STATE SHARE	EMP SHARE	TOTAL	STATE SHARE	EMP SHARE	TOTAL	STATE SHARE	EMP SHARE	TOTAL	STATE SHARE	EMP SHARE	TOTAL	STATE SHARE	EMP SHARE	TOTAL	STATE SHARE	EMP SHARE	TOTAL
	ACTIVE																				
SINGLE	\$417.25	\$139.09	\$556.34	\$360.78	\$120.26	\$481.04	\$442.36	\$147.44	\$589.80	\$417.90	\$139.30	\$557.20	\$343.38	\$114.46	\$457.84	\$426.94	\$142.30	\$569.24	\$414.96	\$138.32	\$553.28
WITH SPOUSE	\$635.38	\$357.20	\$992.58	\$549.38	\$308.84	\$858.22	\$773.82	\$478.90	\$1,252.72	\$730.98	\$454.38	\$1,185.36	\$600.66	\$371.74	\$972.40	\$746.86	\$462.22	\$1,209.08	\$717.48	\$440.84	\$1,158.32
WITH CHILDREN	\$480.39	\$202.23	\$682.62	\$425.23	\$184.71	\$609.94	\$507.12	\$212.20	\$719.32	\$479.06	\$200.46	\$679.52	\$393.74	\$164.82	\$558.56	\$489.56	\$204.92	\$694.48	\$474.18	\$197.54	\$671.72
FAMILY	\$732.40	\$454.24	\$1,186.64	\$639.33	\$398.81	\$1,038.14	\$808.06	\$513.14	\$1,321.20	\$763.30	\$484.70	\$1,248.00	\$627.20	\$398.28	\$1,025.48	\$779.88	\$495.24	\$1,275.12	\$748.70	\$472.06	\$1,220.76
RETIRED NO MEDICARE & RE-EMPLOYED RETIREE																					
SINGLE	\$917.34	\$139.09	\$1,056.43	\$845.34	\$120.26	\$965.60	\$949.80	\$147.44	\$1,097.24	\$900.62	\$139.30	\$1,039.92	N/A	N/A	N/A	\$916.50	\$142.30	\$1,058.80	\$877.88	\$138.32	\$1,016.20
WITH SPOUSE	\$1,458.66	\$406.79	\$1,865.45	\$1,396.18	\$308.84	\$1,705.02	\$1,458.66	\$478.90	\$1,937.56	\$1,383.86	\$454.38	\$1,838.24	N/A	N/A	N/A	\$1,407.74	\$462.22	\$1,869.96	\$1,342.40	\$440.84	\$1,783.24
WITH CHILDREN	\$974.50	\$202.23	\$1,176.73	\$886.12	\$184.71	\$1,070.83	\$1,010.00	\$212.20	\$1,222.20	\$957.94	\$200.46	\$1,158.40	N/A	N/A	N/A	\$974.56	\$204.92	\$1,179.48	\$932.78	\$197.54	\$1,130.32
FAMILY	\$1,402.22	\$454.24	\$1,856.46	\$1,293.35	\$398.81	\$1,692.16	\$1,446.12	\$482.04	\$1,928.16	\$1,370.58	\$456.86	\$1,827.44	N/A	N/A	N/A	\$1,395.66	\$465.22	\$1,860.88	\$1,330.98	\$443.66	\$1,774.64
RETIRED WITH 1 MEDICARE																					
SINGLE	\$242.86	\$80.95	\$323.81	\$209.96	\$69.99	\$279.95	\$267.60	\$89.20	\$356.80	\$258.04	\$86.00	\$344.04	N/A	N/A	N/A	\$258.30	\$86.10	\$344.40	\$255.52	\$85.16	\$340.68
WITH SPOUSE	\$838.72	\$279.58	\$1,118.30	\$725.21	\$241.73	\$966.94	\$988.78	\$329.58	\$1,318.36	\$943.00	\$314.32	\$1,257.32	N/A	N/A	N/A	\$954.18	\$318.06	\$1,272.24	\$913.56	\$304.52	\$1,218.08
WITH CHILDREN	\$461.31	\$153.77	\$615.08	\$415.18	\$138.40	\$553.58	\$463.20	\$154.40	\$617.60	\$443.86	\$147.94	\$591.80	N/A	N/A	N/A	\$447.00	\$149.00	\$596.00	\$433.96	\$144.64	\$578.60
FAMILY	\$1,190.05	\$396.68	\$1,586.73	\$1,040.40	\$346.81	\$1,387.21	\$1,317.46	\$439.14	\$1,756.60	\$1,255.20	\$418.40	\$1,673.60	N/A	N/A	N/A	\$1,271.40	\$423.80	\$1,695.20	\$1,213.50	\$404.50	\$1,618.00
RETIRED WITH 2 MEDICARE																					
WITH SPOUSE	\$423.79	\$141.28	\$565.07	\$366.44	\$122.16	\$488.60	\$481.02	\$160.34	\$641.36	\$462.52	\$154.16	\$616.68	N/A	N/A	N/A	\$464.08	\$154.68	\$618.76	\$450.10	\$150.02	\$600.12
FAMILY	\$575.46	\$191.82	\$767.28	\$503.13	\$167.70	\$670.83	\$595.60	\$198.52	\$794.12	\$572.68	\$190.88	\$763.56	N/A	N/A	N/A	\$574.66	\$191.54	\$766.20	\$554.64	\$184.88	\$739.52
COBRA																					
SINGLE	\$0.00	\$567.46	\$567.46	\$0.00	\$490.65	\$490.65	\$0.00	\$569.82	\$569.82	\$0.00	\$538.32	\$538.32	N/A	N/A	N/A	\$0.00	\$542.64	\$542.64	\$0.00	\$564.04	\$564.04
WITH SPOUSE	\$0.00	\$1,012.44	\$1,012.44	\$0.00	\$875.38	\$875.38	\$0.00	\$1,210.30	\$1,210.30	\$0.00	\$1,143.28	\$1,143.28	N/A	N/A	N/A	\$0.00	\$1,152.84	\$1,152.84	\$0.00	\$1,181.46	\$1,181.46
WITH CHILDREN	\$0.00	\$696.26	\$696.26	\$0.00	\$622.15	\$622.15	\$0.00	\$694.96	\$694.96	\$0.00	\$656.52	\$656.52	N/A	N/A	N/A	\$0.00	\$661.80	\$661.80	\$0.00	\$684.62	\$684.62
FAMILY	\$0.00	\$1,210.38	\$1,210.38	\$0.00	\$1,058.90	\$1,058.90	\$0.00	\$1,276.44	\$1,276.44	\$0.00	\$1,205.72	\$1,205.72	N/A	N/A	N/A	\$0.00	\$1,215.60	\$1,215.60	\$0.00	\$1,244.98	\$1,244.98
DISABILITY COBRA																					
SINGLE	\$0.00	\$834.52	\$834.52	\$0.00	\$721.55	\$721.55	\$0.00	\$839.96	\$839.96	\$0.00	\$791.64	\$791.64	N/A	N/A	N/A	\$0.00	\$800.12	\$800.12	\$0.00	\$824.58	\$824.58
WITH SPOUSE	\$0.00	\$1,488.87	\$1,488.87	\$0.00	\$1,287.34	\$1,287.34	\$0.00	\$1,779.84	\$1,779.84	\$0.00	\$1,681.28	\$1,681.28	N/A	N/A	N/A	\$0.00	\$1,694.96	\$1,694.96	\$0.00	\$1,729.96	\$1,729.96
WITH CHILDREN	\$0.00	\$1,023.93	\$1,023.93	\$0.00	\$914.92	\$914.92	\$0.00	\$1,021.98	\$1,021.98	\$0.00	\$965.44	\$965.44	N/A	N/A	N/A	\$0.00	\$973.04	\$973.04	\$0.00	\$999.52	\$999.52
FAMILY	\$0.00	\$1,779.97	\$1,779.97	\$0.00	\$1,557.22	\$1,557.22	\$0.00	\$1,877.10	\$1,877.10	\$0.00	\$1,773.12	\$1,773.12	N/A	N/A	N/A	\$0.00	\$1,787.52	\$1,787.52	\$0.00	\$1,823.62	\$1,823.62

NOTE: 1) The breakdown between State Share and Employee Share may not be accurate for certain School Board employees due to local funding affecting contributions. Total premium columns are correct for all agencies.
2) All members that retire on or after July 1, 1997 must have Medicare-Parts A and B in order to qualify for the reduced premium rates.