



Premiums

2016 monthly premiums for active employees^{1,2}

	Employee	Employee/spouse	Employee/children	Full family
Savings Plan	\$9.70	\$77.40	\$20.48	\$113.00
Standard Plan	\$97.68	\$253.36	\$143.86	\$306.56
TRICARE Supplement	\$62.50	\$121.50	\$121.50	\$162.50
Dental	\$0.00	\$7.64	\$13.72	\$21.34
Dental Plus ³	\$25.96	\$52.46	\$60.50	\$78.60
Vision	\$7.00	\$14.00	\$14.98	\$21.98

2016 monthly premiums for funded retirees^{1,2}

Retiree eligible for Medicare/spouse eligible for Medicare

	Retiree	Retiree/spouse	Retiree/children	Full family
Savings Plan	N/A	N/A	N/A	N/A
Standard Plan	\$79.68	\$217.36	\$125.86	\$270.56
Medicare Supplement ⁴	\$97.68	\$253.36	\$143.86	\$306.56
TRICARE Supplement	N/A	N/A	N/A	N/A
Dental	\$0.00	\$7.64	\$13.72	\$21.34
Dental Plus ³	\$25.96	\$52.46	\$60.50	\$78.60
Vision	\$7.00	\$14.00	\$14.98	\$21.98

Retiree eligible for Medicare/spouse not eligible for Medicare

	Retiree/spouse	Full family
Savings Plan	N/A	N/A
Standard Plan	\$235.36	\$281.54
Medicare Supplement ⁴	\$253.36	\$299.54
TRICARE Supplement	N/A	N/A
Dental	\$7.64	\$21.34
Dental Plus ³	\$52.46	\$78.60
Vision	\$14.00	\$21.98

Retiree not eligible for Medicare/spouse eligible for Medicare

	Retiree/spouse	Full family
Savings Plan	\$77.40	\$113.00
Standard Plan	\$235.36	\$281.54
Medicare Supplement ⁴	\$253.36	\$299.54
TRICARE Supplement	N/A	N/A
Dental	\$7.64	\$21.34
Dental Plus ³	\$52.46	\$78.60
Vision	\$14.00	\$21.98

Footnotes listed on Page 190

Retiree not eligible for Medicare/spouse not eligible for Medicare

	Retiree	Retiree/spouse	Retiree/children	Full family
Savings Plan	\$9.70	\$77.40	\$20.48	\$113.00
Standard Plan	\$97.68	\$253.36	\$143.86	\$306.56
Medicare Supplement ⁴	N/A	N/A	N/A	N/A
TRICARE Supplement	\$62.50	\$121.50	\$121.50	\$162.50
Dental	\$0.00	\$7.64	\$13.72	\$21.34
Dental Plus ³	\$25.96	\$52.46	\$60.50	\$78.60
Vision	\$7.00	\$14.00	\$14.98	\$21.98

Retiree not eligible for Medicare/spouse not eligible for Medicare/one or more children eligible for Medicare

	Retiree/children	Full family
Savings Plan	\$20.48	\$113.00
Standard Plan	\$143.86	\$306.56
Medicare Supplement ⁴	\$161.86	\$324.56
TRICARE Supplement	N/A	N/A
Dental	\$13.72	\$21.34
Dental Plus ³	\$60.50	\$78.60
Vision	\$14.98	\$21.98

2016 monthly premiums for non-funded retirees^{1,2}

Retiree eligible for Medicare/spouse eligible for Medicare

	Retiree	Retiree/spouse	Retiree/children	Full family
Savings Plan	N/A	N/A	N/A	N/A
Standard Plan	\$439.78	\$930.62	\$678.54	\$1,163.60
Medicare Supplement ⁴	\$457.78	\$966.62	\$696.54	\$1,199.60
TRICARE Supplement	N/A	N/A	N/A	N/A
Dental	\$11.72	\$19.36	\$25.44	\$33.06
Dental Plus ³	\$25.96	\$52.46	\$60.50	\$78.60
Vision	\$7.00	\$14.00	\$14.98	\$21.98

Footnotes listed on Page 190

Retiree eligible for Medicare/spouse not eligible for Medicare

	Retiree/spouse	Full family
Savings Plan	N/A	N/A
Standard Plan	\$948.62	\$1,174.58
Medicare Supplement ⁴	\$966.62	\$1,192.58
TRICARE Supplement	N/A	N/A
Dental	\$19.36	\$33.06
Dental Plus ³	\$52.46	\$78.60
Vision	\$14.00	\$21.98

Retiree not eligible for Medicare/spouse eligible for Medicare

	Retiree/spouse	Full family
Savings Plan	\$790.66	\$1,006.04
Standard Plan	\$948.62	\$1,174.58
Medicare Supplement ⁴	\$966.62	\$1,192.58
TRICARE Supplement	N/A	N/A
Dental	\$19.36	\$33.06
Dental Plus ³	\$52.46	\$78.60
Vision	\$14.00	\$21.98

Retiree not eligible for Medicare/spouse not eligible for Medicare

	Retiree	Retiree/spouse	Retiree/children	Full family
Savings Plan	\$369.80	\$790.66	\$573.16	\$1,006.04
Standard Plan	\$457.78	\$966.62	\$696.54	\$1,199.60
Medicare Supplement ⁴	N/A	N/A	N/A	N/A
TRICARE Supplement	\$62.50	\$121.50	\$121.50	\$162.50
Dental	\$11.72	\$19.36	\$25.44	\$33.06
Dental Plus ³	\$25.96	\$52.46	\$60.50	\$78.60
Vision	\$7.00	\$14.00	\$14.98	\$21.98

Retiree not eligible for Medicare/spouse not eligible for Medicare/one or more children eligible for Medicare

	Retiree/children	Full family
Savings Plan	\$573.16	\$1,006.04
Standard Plan	\$696.54	\$1,199.60
Medicare Supplement ⁴	\$714.54	\$1,217.60
TRICARE Supplement	N/A	N/A
Dental	\$25.44	\$33.06
Dental Plus ³	\$60.50	\$78.60
Vision	\$14.98	\$21.98

Footnotes listed on Page 190

2016 monthly premiums for non-funded survivors^{1,2}

Spouse eligible for Medicare/children eligible for Medicare

	Spouse	Spouse/children	Children only
Savings Plan	N/A	N/A	N/A
Standard Plan	\$439.78	\$678.54	\$238.76
Medicare Supplement⁴	\$457.78	\$714.54	\$256.76 ⁵
TRICARE Supplement	N/A	N/A	N/A
Dental	\$11.72	\$25.44	\$13.72
Dental Plus³	\$25.96	\$60.50	\$34.54
Vision	\$7.00	\$14.98	\$7.98

Spouse eligible for Medicare/children not eligible for Medicare

	Spouse	Spouse/children	Children only
Savings Plan	N/A	N/A	\$203.36
Standard Plan	\$439.78	\$678.54	\$238.76
Medicare Supplement⁴	\$457.78	\$696.54	N/A
TRICARE Supplement	N/A	N/A	N/A
Dental	\$11.72	\$25.44	\$13.72
Dental Plus³	\$25.96	\$60.50	\$34.54
Vision	\$7.00	\$14.98	\$7.98

Spouse not eligible for Medicare/children eligible for Medicare

	Spouse	Spouse/children	Children only
Savings Plan	\$369.80	\$573.16	N/A
Standard Plan	\$457.78	\$696.54	\$238.76
Medicare Supplement⁴	N/A	\$714.54 ⁸	\$256.76 ⁵
TRICARE Supplement	N/A	N/A	N/A
Dental	\$11.72	\$25.44	\$13.72
Dental Plus³	\$25.96	\$60.50	\$34.54
Vision	\$7.00	\$14.98	\$7.98

Spouse not eligible for Medicare/children not eligible for Medicare

	Spouse	Spouse/children	Children only
Savings Plan	\$369.80	\$573.16	\$203.36
Standard Plan	\$457.78	\$696.54	\$238.76
Medicare Supplement⁴	N/A	N/A	N/A
TRICARE Supplement	\$62.50	\$121.50	\$61.00
Dental	\$11.72	\$25.44	\$13.72
Dental Plus³	\$25.96	\$60.50	\$34.54
Vision	\$7.00	\$14.98	\$7.98

Footnotes listed on Page 190

2016 monthly premiums for COBRA^{1,2}

18 and 36 months

	Subscriber	Subscriber/ spouse	Subscriber/ children	Full family	Children only
Savings Plan	\$377.20	\$806.48	\$584.62	\$1,026.16	\$207.42
Standard Plan	\$466.94	\$985.96	\$710.48	\$1,223.60	\$243.54
Medicare Supplement ⁴	\$466.94	\$985.96	\$710.48	\$1,223.60	\$243.54
Dental	\$11.95	\$19.75	\$25.95	\$33.72	\$14.00
Dental Plus ³	\$26.48	\$53.52	\$61.72	\$80.18	\$35.24
Vision	\$7.14	\$14.28	\$15.28	\$22.42	\$8.14

29 months

	Subscriber	Subscriber/ spouse	Subscriber/ children	Full family	Children only
Savings Plan	\$554.70	\$1,186.00	\$859.74	\$1,509.06	\$305.04
Standard Plan	\$686.68	\$1,449.94	\$1,044.82	\$1,799.40	\$358.14
Medicare Supplement ⁴	\$686.68	\$1,449.94	\$1,044.82	\$1,799.40	\$358.14
Dental	\$11.95	\$19.75	\$25.95	\$33.72	\$14.00
Dental Plus ³	\$26.48	\$53.52	\$61.72	\$80.18	\$35.24
Vision	\$7.14	\$14.28	\$15.28	\$22.42	\$8.14

2016 monthly premiums for permanent, part-time teachers²

Category I: 15-19 hours

	Employee	Employee/spouse	Employee/children	Full family
Savings Plan	\$189.74	\$434.02	\$296.82	\$559.52
Standard Plan	\$277.72	\$609.98	\$420.20	\$753.08
TRICARE Supplement	\$62.50	\$121.50	\$121.50	\$162.50
Dental	\$5.86	\$13.50	\$19.58	\$27.20
Dental Plus ³	\$25.96	\$52.46	\$60.50	\$78.60
Vision	\$7.00	\$14.00	\$14.98	\$21.98

Footnotes listed on Page 190

Category II: 20-24 hours

	Employee	Employee/spouse	Employee/children	Full family
Savings Plan	\$128.52	\$312.78	\$202.86	\$407.70
Standard Plan	\$216.50	\$488.74	\$326.24	\$601.26
TRICARE Supplement	\$62.50	\$121.50	\$121.50	\$162.50
Dental	\$3.86	\$11.50	\$17.58	\$25.20
Dental Plus ³	\$25.96	\$52.46	\$60.50	\$78.60
Vision	\$7.00	\$14.00	\$14.98	\$21.98

Category III: 25-29 hours

	Employee	Employee/spouse	Employee/children	Full family
Savings Plan	\$70.92	\$198.64	\$114.44	\$264.82
Standard Plan	\$158.90	\$374.60	\$237.82	\$458.38
TRICARE Supplement	\$62.50	\$121.50	\$121.50	\$162.50
Dental	\$2.00	\$9.64	\$15.72	\$23.34
Dental Plus ³	\$25.96	\$52.46	\$60.50	\$78.60
Vision	\$7.00	\$14.00	\$14.98	\$21.98

2016 monthly life insurance premium

Optional Term Life and AD&D, Dependent Life - Spouse and AD&D

Rates shown per \$1,000 of coverage

Age	Rate per \$1,000/month	Age	Rate per \$1,000/month
Under 35	\$0.052	50-54	\$0.170
35-39	\$0.068	55-59	\$0.296
40-44	\$0.076	60-64	\$0.548
45-49	\$0.108	65-69	\$1.160
		70-74	\$2.002
		75-79	\$3.256
		80 and over	\$5.442

Dependent Life - Child

\$1.10 per month for \$15,000 of coverage; one premium provides coverage for all eligible children.

Footnotes listed on Page 190

2016 monthly employer contributions¹

Active employees

	Employee	Employee/spouse	Employee/children	Full family
Health	\$360.10	\$713.26	\$552.68	\$893.04
Dental	\$11.72	\$11.72	\$11.72	\$11.72
Life	\$0.28	\$0.28	\$0.28	\$0.28
Long term disability	\$3.22	\$3.22	\$3.22	\$3.22

Permanent, part-time teachers (Category I: 15-19 hours)

	Employee	Employee/spouse	Employee/children	Full family
Health	\$180.06	\$356.64	\$276.34	\$446.52
Dental	\$5.86	\$5.86	\$5.86	\$5.86

Permanent, part-time teachers (Category II: 20-24 hours)

	Employee	Employee/spouse	Employee/children	Full family
Health	\$241.28	\$477.88	\$370.30	\$598.34
Dental	\$7.86	\$7.86	\$7.86	\$7.86

Permanent, part-time teachers (Category III: 25-29 hours)

	Employee	Employee/spouse	Employee/children	Full family
Health	\$298.88	\$592.02	\$458.72	\$741.22
Dental	\$9.72	\$9.72	\$9.72	\$9.72

Footnotes for comparison and premium charts on Pages 184-190:

¹Premiums for local subdivisions may vary. To verify your rates, contact your benefits office.

²State Health Plan subscribers who use tobacco or cover dependents who use tobacco will pay a \$40-per-month surcharge for subscriber-only coverage. The surcharge is \$60 for other levels of coverage. The tobacco-use surcharge does not apply to TRICARE Supplement subscribers.

³If you enroll in Dental Plus, you must also be enrolled in the State Dental Plan. You will pay the combined premiums for both plans.

⁴If the Medicare Supplemental Plan is elected, claims for covered subscribers not eligible for Medicare will be based on the Standard Plan provisions.

⁵This premium applies only if one or more children are eligible for Medicare.