



PO Box 10561
Raleigh, North Carolina 27605-0561

ADDRESS SERVICE REQUESTED

Medicare Beneficiaries Urged to be on the Look-Out for Phone Scams

The Centers for Medicare & Medicaid Services (CMS) warns seniors and people with disabilities to be aware of a scheme that asks Medicare beneficiaries for money and checking account information to help them enroll in a Medicare Prescription Drug Plan.

This scheme is called the “\$299 Ring” for the typical amount of money Medicare beneficiaries are talked into withdrawing from their checking accounts to pay for a nonexistent prescription drug plan. Consumers can report these cases to their local law enforcement agencies or 1-877-7SAFERX (1-877-772-3379).

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Important Phone Numbers to Remember

NCRGEA	1-800-356-1190
MetLife Dental	1-888-466-9073
NC Retirement System	1-877-733-4191
CIGNA (Medicare Administrator)	1-800-633-4227
Seniors' Health Insurance Information Program	1-800-443-9354
Medical Review of North Carolina	1-800-722-0468
NC State Health Plan	1-919-881-2300
Blue Cross/Blue Shield	1-800-422-4658
(State Health Plan Administrator)	
Social Security Administration	1-800-772-1213
State Employees' Credit Union	1-888-732-8562
Local Government Federal Credit Union	1-888-732-8562

Living Power

For all who have made a living and now wish to make a life

State Health Plan Offers New Option

March/April 2006

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Mr. George Stokes, Executive Administrator of the State Health Plan, recently announced that state employees and retirees soon will have the option of participating in a Preferred Provider Organization (PPO) insurance plan. The PPO option will be available to members of the State Health Plan effective October 1, 2006.

The PPO is an alternative to the current indemnity plan that covers all active and retired teachers and state employees. Mr. Stokes and his staff developed the PPO option in response to concerns expressed by members of the State Health Plan regarding the affordability of coverage for spouses and family members. The new PPO will have a coverage tier for “member +spouse”, a feature strongly supported by our Association and other groups representing active employees.

The PPO will offer three variants to State Health Plan members. These are: Smart Choice Basic, Smart Choice, and Smart Choice Plus. These variants provide different deductibles, co-pays, and annual out-of-pocket limits. The following article

presents a summary of information on the PPO that has been prepared by the staff of the State Health Plan, including answers to frequently asked questions.

Facts About the New PPO

- The State of North Carolina currently offers Comprehensive Major Medical (CMM) or “indemnity” insurance to its employees. Beginning on October 1, 2006, the State will offer employees an additional choice in health insurance – a Preferred Provider Organization, or PPO, insurance plan.

- Blue Cross and Blue Shield of North Carolina (BCBSNC) is the administrator of the State Health Plan’s CMM insurance and will also administer the State’s PPO plan.

- In general, PPO insurance plans provide greater cost savings to employees and employers compared to more traditional indemnity plans.

- In a PPO plan, employees obtain medical services at reduced costs when

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NCRGEA News & Views

The State Division of Motor Vehicles now has specialty license plates available for retired state and local law enforcement officers. The specialty tags will bear the phrase “Retired Law Enforcement Officer” along with a representation of a law enforcement badge.

The DMV office in Raleigh will begin accepting applications for the plates in mid April. Eligible retirees can obtain an application to purchase the tags from the DMV by calling (919) 861-3575 or by going to the Division’s website at www.ncdot.org/dmv. In order to purchase a Retired Law Enforcement Officer license plate, applicants must provide a copy of his/her officer retired identification card or letter of retirement.

These special plates were authorized by the General Assembly in 2003. The law required that the DMV receive at least 300 applications before the plates could be developed. The Division already has received more than the required 300 applications.

Change of Address?

Have you moved recently? Has your local post office changed your street address for 911?

We need your correct address to keep you informed and to get your *Living Power* delivered to your door. Call us at 919-834-4652 or 1-800-356-1190 or email kathy@ncrgea.com. Thanks!

State Health Plan Offers New Option

(Continued from page 1)

they obtain these services from a doctor, hospital or other provider that is “in network” – that is, from a provider in the Preferred Provider Organization.

- State employees who opt for PPO health insurance from the State will have “in-network” access to the BCBSNC “Blue Options” PPO network.

THE BCBSNC BLUE OPTION PPO NETWORK INCLUDES THE FOLLOWING:

- Participating providers in all 100 counties of North Carolina.
- More than 22,000 health care providers, including physicians, specialists, hospitals and other providers.
- Every major medical center in North Carolina and 113 hospitals overall, representing 97% of the hospitals in the state.
- Approximately 90 percent of the primary care physicians in the state and about 85 percent of the specialty physicians. This is a total of more than 16,000 physicians overall.

Additional details about the State PPO and CMM/indemnity products

- The State will allow employees to choose among three PPO options, in addition to the existing indemnity plan. The PPO options are called Smart Choice Basic, Smart Choice and Smart Choice Plus.
- The PPO options are based on different levels of physician office visit “co-pays,” different levels of “co-insurance” and different levels of “deductible.” The amount of money that State employees pay out-of-pocket for their PPO premiums

The Many Faces of Fraud

Various scams are claiming more consumer dollars each year. Based on statistics from 2005, the average loss per individual for telemarketing fraud was \$2,892 and \$1,917 for Internet fraud - both are nearly double the amounts from 2004. Educating yourself on the different types of fraud, as listed below, may save you money. Use this information to avoid becoming a victim.

Internet

There are numerous scams floating around the Internet such as phishing or auctions.

Phishing is an email scam involving fraudsters who pretend to be a legitimate business such as a financial institution, credit card company, online service provider or retailer, etc. Phishers send emails or pop-up messages to deceive you into disclosing your credit card numbers, the three-digit security code on the back of your credit card, account information, social security number, passwords or other sensitive information. In most cases, the email claims there is an account problem or warns of fraud against your account.

Internet auctions are very popular right now allowing you to find any item you may want. However, you can’t be guaranteed that you will receive the merchandise purchased. If possible, check the website for feedback forums and research the seller.

Fraudulent Checks

If you are selling something or trying to lease your house or condo, take caution if you receive a check over the amount of the agreed upon price or rent. Fraudsters will pay with an “official looking” check and then request that you wire the excess funds to their account. Days or even months later, that check will be returned as counterfeit and you will be out of your money.

Investment Fraud - “Get Rich Quick” Schemes

Investment opportunities or “get rich quick” schemes are a favorite of fraudsters. Whether they’re selling securities or offering quick profits, fraudulent promoters will try to get you to invest large sums of your money.

Fraudulent investment promoters often send enticing or “official-looking” mailings that urge you to call or you may receive a call from one of these individuals. Here’s what to listen for to recognize a phony sales pitch: promise of huge returns, guarantees of big profits over a short time period, promise of no risk involved and pressure to act now.

Remember, if it sounds too good to be true -- it probably is!

Information for this article was provided by the State Employees’ Credit Union.



Living Power is published to provide current information for NCRGEA’s membership. Newsletters are printed bi-monthly and mailed to all members of NCRGEA. Your comments are welcome.

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Keep This on the Fridge

We got these off the internet. We're not sure if they all work or not so try them at your own discretion...

Here are some more.

Tomato paste boil cure — cover the boil with tomato paste as a compress. The acids from the tomatoes soothe the pain and bring the boil to a head.

Balm for broken blisters — to disinfect a broken blister, dab on a few drops of Listerine.

Vinegar to heal bruises — soak a cotton ball in white vinegar and apply it to the bruise for 1 hour. The vinegar reduces the blueness and speeds up the healing process.

Kill fleas instantly. Dawn dish washing liquid does the trick. Add a few drops to your dog's bath and shampoo the animal thoroughly. Rinse well to avoid skin irritations.

Rainy day cure for dog odor —next time your dog comes in from the rain, simply wipe down the animal with Bounce or any dryer sheet.

Eliminate ear mites — all it takes is a few drops of corn oil in your cat's ear. Massage it in, then clean with a cotton ball. Repeat daily for 3 days. The oil soothes the cat's skin, smothers the mites, and accelerates healing.

Quaker Oats for fast pain relief. Mix 2 cups of Quaker Oats and 1 cup of water in a bowl and warm in the microwave for 1 minute, cool slightly, and apply the mixture to your hands for soothing relief from arthritis pain.

Drinking two glasses of Gatorade can relieve headache pain almost immediately — without the unpleasant side effects caused by traditional “pain relievers”.

Before you head to the drugstore for a high-priced inhaler filled with mysterious chemicals, try chewing on a couple of curiously strong Altoids peppermints. They'll clear up your stuffed nose.

Achy muscles from a bout of the flu? Mix 1 tablespoon of horseradish in 1 cup of olive oil. Let the mixture sit for 30 minutes, then apply it as a massage oil, for instant relief for aching muscles.

Sore throat? Just mix 1/4 cup of vinegar with 1/4 cup of honey and take 1 tablespoon six times a day. The vinegar kills the bacteria.

Cure urinary tract infections with Alka-Seltzer. Just dissolve two tablets in a glass of water and drink it at the onset of the symptoms. Alka-Seltzer begins eliminating urinary tract infections almost instantly — even though the product has never been adver-

tised for this use. (Note: Alka-Seltzer Plus Cold Medicine is not the same and contains aspirin, which can cause stomach bleeding if you have ulcers.)

Honey remedy for skin blemishes — cover the blemish with a dab of honey and place a Band-Aid over it. Honey kills the bacteria, keeps the skin sterile, and speeds healing. Works overnight.

Listerine therapy for toenail fungus — get rid of unsightly toenail fungus by soaking your toes in Listerine mouthwash. The powerful antiseptic leaves your toenails looking healthy again.

Easy eyeglass protection — to prevent the screws in eyeglasses from loosening, apply a small drop of clear nail polish to the threads of the screws before tightening them.

Coca-Cola cure for rust — just saturate an abrasive sponge with Coca Cola and scrub the rust stain. The phosphoric acid in the coke is what gets the job done.

If menacing bees, wasps, hornets, or yellow jackets get in your home and you can't find the insecticide, try a spray of Formula 409. Insects drop to the ground instantly.

Smart splinter remover — pour a drop of Elmer's Glue-All over the splinter, let dry, and peel the dried glue off the skin. The splinter sticks to the dried glue.

will differ based on the option that employees select.

- Under any of the three State Health Plan PPO options, State employees will be eligible to obtain medical services from “out-of-network” providers (i.e., physicians, hospitals or other providers not in the Blue Options PPO network). However, out-of-pocket employee costs for co-pays, co-insurance and deductibles will be significantly higher than in-network costs.

- Under the State PPO, physician referrals are not required. PPO members will decide for themselves when to visit a specialist -- without a referral from their primary care provider.

- The indemnity product offers health insurance coverage designed more specifically to offset the costs of catastrophic illness.

- In order to make savings available as soon as possible, the effective date for the PPO plan will be October 1, 2006. **The Open Enrollment period is May 22 to June 30, 2006.**

Wellness/Preventive Health Coverage

Preventive Care includes routine physical exams, well baby, well child care, and immunizations. The following preventive care benefits are available out-of-network: gynecological exams, cervical cancer screening, ovarian cancer screening, screening mammograms, colorectal screening and prostate specific antigen tests.

The costs for PPO Options for Wellness/Preventive Health Coverage are the following:

	<u>Smart Choice Basic</u>	<u>Smart Choice Plus</u>	<u>Smart Choice Plus</u>
Primary Care Provider	\$25 co-pay	\$30 co-pay	\$15 co-pay
Specialist	\$50 co-pay	\$40 co-pay	\$30 co-pay

Frequently Asked Questions (FAQs) About the New PPO

Q: What are the biggest differences between the current state plan (Comprehensive Major Medical or CMM) and the PPO?

Here are some of the key differences between the State's current CMM or “indemnity” plan and a PPO.

- With the PPO, State members will save on their medical costs by avoiding deductibles and co-insurance for physician office visits.

- State members will have three PPO plan options, with varying levels of coverage to choose from.

- With the PPO, State members will also have the option of covering themselves and their spouses without having to pay for full family coverage.

- There will be reduced premiums for dependent coverage with the PPO.

- With the PPO, the wellness benefits are more extensive. The CMM plan only allows the first \$150 in wellness benefits per benefit year, and then requires a deductible and co-insurance. Also, with the CMM, some benefits are limited to once every two or three years, depending on age. In comparison, the PPO plans pay for annual physical exams, annual Ob/Gyn visits and annual eye exams at 100%, with no age restrictions.

(Continued on next page)

Editor's Note:

We urge members of NCRGEA to carefully compare the benefits of the State Health Plan's existing Comprehensive Major Medical Plan with those offered under the new PPO. The new option is most welcome as it will now give you a choice in coverage, but may not fit your specific health needs.

Q: Do I have a choice between my current health insurance plan (the CMM or indemnity plan) and the PPO?

Yes. Eligible state employees will have the option of remaining with the current plan or switching to one of the three PPO plan options. If they don't make a selection, they will automatically remain on the current plan.

Q: Will there be a difference in rates?

Yes, there will be a difference in premiums, depending on which plan a member selects. The State Health Plan projects that state employees and retirees will realize significant cost savings with the PPO options. We are working quickly to develop details about the new plans, including firm rates, and expect to have some additional information for you in the next few weeks. Information sharing will be ongoing throughout the process. Also, the State Health Plan will provide a Benefits Calculator on the Web site. This "decision tool" will enable members to compare the indemnity plan (CMM) and the PPO and calculate their own cost savings. Visit www.statehealthplan.state.nc.us for periodic information updates.

We will be providing detailed information about the PPO plans to state employees this spring so they can make informed decisions about health insurance options during this year's open enrollment period (exact timing to be determined.)

Q: Will I have to use the PPO network of providers?

In order to get full benefits, you will. If you choose the PPO plan, you will use the Blue Cross and Blue Shield of North Carolina Blue Options network. If you receive services outside the network, you will still have coverage, but your benefits will be reduced, and you will have to pay more out of pocket. The Blue Options network includes about 90 percent of the primary care physicians in the state, 97 percent of the hospitals in the state, and participating providers in all 100 counties of North Carolina. Outside North Carolina, you will have access to the extensive Blue Card network of providers throughout the United States.

Q: Will network providers be available in all 100 counties?

Yes. If you choose the PPO plan, you will use the Blue Cross and Blue Shield of North Carolina Blue Options network. The Blue Options network includes about 90 percent of the primary care physicians in the state, 97 percent of the hospitals in the state, and participating providers in all 100 counties of North Carolina. Outside North Carolina, PPO members will have access to the extensive Blue Card network of providers throughout the United States.

Q: When is the open enrollment period?

The Open Enrollment period is May 22 to June 30, 2006. Enrollment materials will be sent to you at your home address well in advance of the Open Enrollment period.

chronic medical conditions better manage their health.

· CIGNA HealthCare consumer communications have been named the Best Health Plan Initiative for Best Technology Introduced by a Health Plan Organization for Employee/Consumer Choice, respectively, by the Consumer Directed Health Care (CDHC) Awards. CIGNA HealthCare is highly recognized in the industry for its wellness initiatives and member wellness resources and tools.

Caremark is a leading pharmaceutical services company, providing through its affiliates comprehensive drug benefit ser-



vices to more than 2,000 health plan sponsors and their plan participants. Caremark operates a national retail pharmacy network with more than 60,000 participating pharmacies, seven mail service pharmacies, the industry's only FDA-regulated repackaging plant and 21 licensed specialty pharmacies for delivery of advanced medications to individuals with chronic or genetic diseases and disorders.

CarePatterns® disease management programs — the first and only suite of programs offered by a prescription benefit manager to be fully accredited by the National Committee for Quality Assurance — provide comprehensive plan participant

care for specific conditions.

Caremark applies more than a quarter-century of experience to:

· **Improve Health.** Caremark's goal is to enhance each plan participant's health, doing everything from providing proactive health education to monitoring prescription history for potential drug interactions.

· **Support Better Healthcare Decisions.** Both plan participants and plan sponsors rely on Caremark's pharmacy benefits plan communications, online tools and health management and clinical programs to make choices that will enhance health and contain costs.

· **Provide Value.** Guided by the knowledge and expertise of our independent

Pharmacy and Therapeutics Committee, as well as Caremark's analytics, clinical and account management teams, Caremark considers all the data and recommends the most clinically appropriate, cost-effective drugs and healthcare programs.

· **Enhance the Healthcare Experience.** It's Caremark's job to provide the most convenient service, personal care and attention, and relevant, up-to-date information to both plan participants and plan sponsors.

Information for this article was provided by the North Carolina Association of County Commissioners.

NCACC partners with leading companies to deliver County Health Plan

The North Carolina Association of County Commissioners has partnered with two nationally recognized leaders in providing health care services to help create the County Health Plan, a group benefits plan designed by and for counties.

CIGNA HealthCare, Inc. will provide claims administration and disease management services to the NCACC Group Benefits Pool, and **Caremark Rx Inc.** will serve as the pharmacy benefits manager. These changes will be effective beginning July 1, 2006. The Group Benefits Pool Board of Trustees voted to make these changes after a lengthy request-for-proposal process. The Trustees reviewed five insurance carriers, four third-party administrators and five pharmacy benefits managers before selecting CIGNA and Caremark.

CIGNA and its predecessor companies have a long history of supporting the health care needs of Americans. CIGNA was formed in 1982 with the merger of Connecticut General (established 1865 and doing group health insurance since 1937) and Insurance Company of North America (established 1792). With the acquisition of Equicor in 1990, CIGNA became the largest investor-owned managed care organization in the country.

CIGNA is one of the most successful and well-managed companies in the group insurance industry:

- Since December 2004, 100 percent of CIGNA U.S. plan locations have gone through the National Committee for Quality Assurance accreditation review process, and 100 percent have received either Excellent or Commendable accreditation. These two ratings are the highest ratings a health plan can receive.

- CIGNA provides medical benefits to approximately 8.9 million people, dental coverage to approximately 13.5 million people, and behavioral health coverage to approximately 16 million people. In North Carolina, CIGNA provides medical coverage to approximately 3,000 employer groups with more than 400,000 members.

- CIGNA offers a national PPO network with 4,600 hospitals and 454,000 primary and specialty care physicians. In North Carolina, CIGNA contracts with more than 15,000 providers, including more than 250 hospitals.

- Intracorp, an affiliate of CIGNA, received a full URAC accreditation status for health care utilization review services, demand management programs and case management services. Intracorp serves more than 28 million lives.

- CIGNA Behavioral Health is one of the top four companies providing managed mental health and substance abuse programs.

- The Disease Management Association of America (DMAA) has awarded CIGNA HealthCare the 2005 Health Plan/Managed Care Organization Disease Management Leadership Award, recognizing CIGNA's leadership in providing disease management programs that help members with

Q: What choice do I need to make? Which plan should I select?

We will be providing detailed information about the PPO options this spring, but can't tell you which plan to select. Your choice depends on your individual circumstances; e.g., whether your doctor is a participating provider, how frequently you or members of your family receive services, and how much you normally spend on deductibles and coinsurance, etc. There will be an online Benefits Calculator, or "decision tool," to assist you in making your choice.

Q. Once enrolled in the PPO, how will that effect my current Comprehensive Major Medical Plan's medical service requirements?

Once you enroll in the PPO, all prior approvals, appeals and pre-authorizations will be rolled over into the PPO plan. There will be no changes to your pharmacy benefits. You will receive a new benefit booklet once you have enrolled in the PPO.

Q: When will I receive information? How long do I have to wait for information?

We expect to have more information available in the next few weeks. Detailed information about the PPO plan will be provided to state employees this spring. This will assist employees in making informed decisions about health insurance options during this year's open enrollment period, May 22 to June 30, 2006.

Q: Why is the State offering a PPO?

The North Carolina State Health Plan is offering a PPO in order to address State Health Plan members' requests for greater affordability and choice in obtaining health care coverage.

Q: Will State retirees be eligible to select the PPO?

Yes, eligible retirees (including Medicare-eligible retirees) will be able to select the PPO.

Q: Is NC HealthChoice eligible for the PPO?

No, NC HealthChoice members are not eligible for the PPO. Although NC HealthChoice is administered by the North Carolina State Health Plan, it is actually a program of the North Carolina Department of Health and Human Services (DHHS), co-funded by DHHS and the Federal Government.

Q. How can I get more information and/or updates on the PPO?

For more information, visit the State Health Plan's Web site at www.statehealthplan.state.nc.us and click on "New PPO" for ongoing updates, or talk to your Health Benefits Representative. Over the next few weeks, the State Health Plan and Blue Cross and Blue Shield of North Carolina will provide more details about information meetings and the open enrollment period. Updates will be provided throughout the process, as information becomes available.

North Carolina State Health Plan Choices for Plan Year 2006/07
In addition to the CMM (Indemnity Plan), there are three PPO Options: Smart Choice Basic, Smart Choice and Smart Choice Plus

Plan Design Feature	CMM (Indemnity Plan)	Smart Choice Basic		Smart Choice		Smart Choice Plus	
		In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Lifetime Maximum	\$5 million	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Annual Deductible (Ind/Fam)	\$350/\$1,050	\$600/\$1,800	\$1,200/\$3,600	\$300/\$900	\$600/\$1,800	\$150/\$450	\$300/\$900
Plan Coinsurance	80%	70%	50%	80%	60%	90%	70%
Coinsurance Maximum (Ind/Fam)	\$2,000/\$6,000	\$2,500/\$7,500	\$5,000/\$15,000	\$1,750/\$5,250	\$3,500/\$10,500	\$1,000/\$3,000	\$2,000/\$6,000
Physician Office Visits							
Primary Care	\$15 + D&C	\$25	Covered after D&C	\$20	Covered after D&C	\$15	Covered after D&C
Specialist	\$15 + D&C	\$50	Covered after D&C	\$40	Covered after D&C	\$30	Covered after D&C
Urgent Care		\$75	\$75	\$50	\$50	\$50	\$50
Inpatient co-pay	\$150, then D & C	\$200, then D & C	\$200, then D & C	\$150, then D & C	\$150, then D & C	\$100, then D & C	\$100, then D & C
Outpatient Hospital & Ambulatory Surgical Center co-pay	\$75, then D & C	D & C	D & C	D & C	D & C	D & C	D & C
Emergency Room co-pay	\$200, then D & C	\$250, then D & C	\$250, then D & C	\$200, then D & C	\$200, then D & C	\$150, then D & C	\$150, then D & C
Wellness Benefits (annual)	\$150	Per schedule	Not covered	Per schedule	Not covered	Per schedule	Not covered
Prescription Drug Benefits							
Generic Rx co-pay	\$10	\$10		\$10		\$10	
Preferred Rx co-pay (no generic equiv.)	\$25	\$25		\$25		\$25	
Preferred Rx co-pay (generic equiv.)	\$40	\$40		\$40		\$40	
Non-preferred Rx co-pay	\$50	\$50		\$50		\$50	

- Notes:
- 1.) PPO Options: There are no deductibles for physician office visits. Only the co-payment applies.
 - 2.) PPO Options: For Wellness/Preventive Health Coverage please see page 3.
 - 3.) Also, NC HealthSmart, the SHP healthy living initiative, is available at no additional cost to all eligible State Health Plan members. (COBRA, Medicare eligibles and TRICARE enrollees are not eligible for NC HealthSmart.)
 - 4.) The drug benefit doesn't change under any of the plans.



Teachers' and State Employees' Comprehensive Major Medical Plan

Comparison of Employee Contribution Rates for Plan Year 2006/07

	EMPLOYEE CONTRIBUTION RATES				STATE RATE	
	CMM (Indemnity Plan)	Smart Choice Basic	Smart Choice	Smart Choice Plus	CMM (Indemnity Plan)	PPO Preferred Provider Organization
		70/30	80/20	90/10		
NON-MEDICARE ACTIVE/EARLY RETIREE						
EE	\$0.00	\$0.00	\$0.00	\$39.54	\$321.14	\$311.51
EE+CHILD(REN)	\$200.18	\$135.48	\$180.18	\$242.59	\$321.14	\$311.51
EE+SPOUSE	\$480.14	\$349.08	\$415.14	\$507.37	\$321.14	\$311.51
EE+FAMILY	\$480.14	\$371.81	\$440.14	\$535.54	\$321.14	\$311.51
MEDICARE - EE ELIGIBLE						
EE	\$0.00	\$0.00	\$0.00	\$30.10	\$244.48	\$237.15
EE+CHILD(REN)	\$200.38	\$142.24	\$180.18	\$233.15	\$244.48	\$237.15
EE+CHILD(REN) (ELIG)	\$152.16	\$103.13	\$137.16	\$184.67	\$244.48	\$237.15
EE+SPOUSE	\$480.14	\$355.84	\$415.14	\$497.93	\$244.48	\$237.15
EE+SPOUSE (ELIG)	\$364.92	\$260.19	\$309.92	\$379.36	\$244.48	\$237.15
EE+FAMILY	\$480.14	\$378.57	\$440.14	\$526.11	\$244.48	\$237.15
EE+FAMILY(ELIG)	\$364.92	\$282.91	\$334.92	\$407.53	\$244.48	\$237.15
MEDICARE - DEP ELIGIBLE						
EE+CHILD(REN) ELIG	\$152.16	\$96.37	\$137.16	\$194.11	\$321.14	\$311.51
EE+SPOUSE (ELIG)	\$364.92	\$253.43	\$309.92	\$388.80	\$321.14	\$311.51
EE+FAMILY(ELIG)	\$364.92	\$276.15	\$334.92	\$416.97	\$321.14	\$311.51

- Notes:
- 1.) EE -- Employee only; contribution provided by employing agency for all but Smart Choice Plus. (For Smart Choice Plus, you contribute a portion of the premium for increased benefits.)
 - 2.) Dep -- Dependent
 - 3.) EE + Spouse is available for the new PPO options at reduced rates.
 - 4.) COBRA rates will follow at a later date.
 - 5.) National Guard, Fire Department and Emergency Medical rates will also follow at a later date.