



## PUBLIC SCHOOL ACTIVE EMPLOYEES MONTHLY PREMIUMS

### WITH WELLNESS

2019 Plan Year Rates - Effective January 1, 2019 - December 31, 2019

	Base Monthly Premium	State and Plan Contribution	School District Contribution	Total Monthly Employee Cost
<b>Premium</b>				
Employee Only	\$555.99	\$213.43	\$159.10	<b>\$183.46</b>
Employee & Spouse	\$1,328.58	\$338.28	\$159.10	<b>\$831.20</b>
Employee & Child(ren)	\$967.92	\$338.28	\$159.10	<b>\$470.54</b>
Employee & Family	\$1,555.82	\$563.28	\$159.10	<b>\$833.44</b>
<b>Classic</b>				
Employee Only	\$313.40	\$108.28	\$159.10	<b>\$46.02</b>
Employee & Spouse	\$717.00	\$203.28	\$159.10	<b>\$354.62</b>
Employee & Child(ren)	\$520.80	\$203.28	\$159.10	<b>\$158.42</b>
Employee & Family	\$900.70	\$383.28	\$159.10	<b>\$358.32</b>
<b>Basic</b>				
Employee Only	\$251.64	\$81.28	\$159.10	<b>\$11.26</b>
Employee & Spouse	\$535.16	\$103.28	\$159.10	<b>\$272.78</b>
Employee & Child(ren)	\$384.24	\$103.28	\$159.10	<b>\$121.86</b>
Employee & Family	\$603.00	\$168.28	\$159.10	<b>\$275.62</b>
<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