



## PUBLIC SCHOOL ACTIVE EMPLOYEES MONTHLY PREMIUMS

### WITHOUT 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	\$138.43	\$159.10	<b>\$258.46</b>
Employee & Spouse	\$1,328.58	\$263.28	\$159.10	<b>\$906.20</b>
Employee & Child(ren)	\$967.92	\$263.28	\$159.10	<b>\$545.54</b>
Employee & Family	\$1,555.82	\$488.28	\$159.10	<b>\$908.44</b>
<b>Classic</b>				
Employee Only	\$313.40	\$33.28	\$159.10	<b>\$121.02</b>
Employee & Spouse	\$717.00	\$128.28	\$159.10	<b>\$429.62</b>
Employee & Child(ren)	\$520.80	\$128.28	\$159.10	<b>\$233.42</b>
Employee & Family	\$900.70	\$308.28	\$159.10	<b>\$433.32</b>
<b>Basic</b>				
Employee Only	\$251.64	\$6.28	\$159.10	<b>\$86.26</b>
Employee & Spouse	\$535.16	\$28.28	\$159.10	<b>\$347.78</b>
Employee & Child(ren)	\$384.24	\$28.28	\$159.10	<b>\$196.86</b>
Employee & Family	\$603.00	\$93.28	\$159.10	<b>\$350.62</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