

Premium Rates

(Active, LOA, and COBRA Members)

October 1, 2015 – September 30, 2016

The following health insurance premiums are the base rates set by the PEEHIP Board. Base rates are before the wellness and tobacco premiums are applied, if applicable.

PEEHIP Hospital/Medical & VIVA Health Plan Active Member

Single	\$ 15
Family without Spouse	\$ 177
Family with Spouse* (includes spousal surcharge)	\$ 202

Member on LOA/COBRA

Single	\$ 444
Family without Spouse	\$1,131
Family with Spouse* (includes spousal surcharge)	\$1,156

*Effective October 1, 2015, the spousal surcharge will be phased in over 3 years beginning with \$25 per month the first year, \$50 per month the second year, and \$75 per month the third year. **Note:** The spousal surcharge will not apply to spouses who are independently eligible for PEEHIP.

PEEHIP Supplemental Medical Plan Active Member

Single or Family	\$ 0
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Member on LOA/COBRA

Single or Family	\$ 164
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Tobacco Premium

Active/Retired Member, LOA/COBRA, Surviving Dependent and Covered Spouses

Member	\$ 50
Spouse	\$ 50

The tobacco premium applies only to the PEEHIP Hospital Medical and VIVA Health plans. A premium discount can be obtained if the member and/or spouse each certify having not used tobacco products in the past 12 months. See page 38 to learn how you and/or your spouse can receive the non-tobacco user discount.

Wellness Premium

(Non-Medicare-Eligible) Active/Retired Member, LOA/COBRA, Surviving Dependent & Covered Spouses

Member	\$ 50
Spouse	\$ 50

The wellness premium applies only to the Blue Cross Blue Shield Hospital Medical Group #14000 plan for non-Medicare-eligible active and retired members, non-Medicare-eligible members on LOA or COBRA, and non-Medicare-eligible spouses on active or retired contracts. See page 35 to learn how you and/or your spouse can receive a wellness premium waiver.

Optional Coverage Plan Premiums

Cancer, Indemnity, and Vision	Single or Family	\$ 38
Dental	Single	\$ 38
Dental	Family	\$ 50

Insurance premiums and enrollments are handled by PEEHIP, not by the employer. If the payroll deduction is incorrect, members need to contact PEEHIP instead of the employer. Premiums for PEEHIP medical, dental, vision, cancer, and indemnity will be paid with pre-tax dollars and are excludable from federal and state income taxes under Sections 105(b) or 106 of the Internal Revenue Code for active employees.

PEEHIP premiums are deducted in the month prior to the month of coverage (i.e. the premium for October's insurance coverage is deducted in September). Flexible Spending Account contributions are deducted in the current month (i.e. the contribution for October is deducted in October).