



PUBLIC SCHOOL ACTIVE EMPLOYEES MONTHLY PREMIUMS

WITH WELLNESS VISIT

2016 Plan Year Rates - Effective January 1, 2016 - December 31, 2016

	Base Monthly Premium	State and Plan Contribution	School District Contribution	Total Monthly Employee Cost
Premium				
Employee Only	\$590.40	\$256.54	\$155.00	\$178.86
Employee & Spouse	\$1,308.18	\$340.98	\$155.00	\$812.20
Employee & Child(ren)	\$1,077.80	\$463.24	\$155.00	\$459.56
Employee & Family	\$1,795.58	\$826.18	\$155.00	\$814.40
Classic				
Employee Only	\$270.02	\$70.54	\$155.00	\$44.48
Employee & Spouse	\$562.28	\$61.06	\$155.00	\$346.22
Employee & Child(ren)	\$468.48	\$159.10	\$155.00	\$154.38
Employee & Family	\$760.74	\$255.90	\$155.00	\$349.84
Basic				
Employee Only	\$165.48	\$0.00	\$155.00	\$10.48
Employee & Spouse	\$421.20	\$0.00	\$155.00	\$266.20
Employee & Child(ren)	\$273.64	\$0.00	\$155.00	\$118.64
Employee & Family	\$423.98	\$0.00	\$155.00	\$268.98

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