

Annual Employee Medical Plan Contribution Rates for Employee, Spouse, and Dependent Child Coverage

Effective January 1 – December 31, 2012

Receive a PHA Medical Plan Premium Credit up to \$360 annually (\$30/monthly pay; \$13.85/biweekly pay) by completing the Your Plan for Health (YP4H) Personal Health Assessment (PHA). To complete the PHA, log in to YourPlanForHealth.com and click *Personal Health Assessment* under *Get Started*.

The following FULL-TIME RATES are for eligible regular and term appointments of 75% to 100% FTE.

Coverage Level	Prime Care Advantage	Prime Advantage Value	Prime Advantage Plus	Independent Choice	Prime Care Connect ²	Out-of-Area Plan ²
Employee Only	\$1,174.92	\$688.44	\$1,949.76	\$2,477.64	\$1,174.92	\$1,174.92
Employee + Children	\$1,968.24	\$1,068.24	\$3,401.64	\$4,394.16	\$1,968.24	\$1,968.24
Employee + Spouse	\$2,201.64	\$1,180.08	\$3,828.84	\$4,958.04	\$2,201.64	\$2,201.64
Family	\$3,158.16	\$1,637.88	\$5,579.52	\$7,269.00	\$3,158.16	\$3,158.16

The following PART-TIME RATES are for eligible regular and term appointments of 50% to 74% FTE.

Coverage Level	Prime Care Advantage	Prime Advantage Value	Prime Advantage Plus	Independent Choice	Prime Care Connect ²	Out-of-Area Plan ²
Employee Only	\$2,633.28	\$2,146.80	\$3,408.12	\$4,402.68	N/A	\$2,633.28
Employee + Children	\$4,616.52	\$3,716.52	\$6,049.92	\$7,889.88	N/A	\$4,616.52
Employee + Spouse	\$5,199.84	\$4,178.28	\$6,827.04	\$8,915.64	N/A	\$5,199.84
Family	\$7,591.32	\$6,071.04	\$10,012.68	\$13,120.68	N/A	\$7,591.32

The following FULL COST RATES are for eligible regular and term appointments of 0.1% to 49% FTE and temporary appointments of 75% to 100% FTE

Coverage Level	Prime Care Advantage	Prime Advantage Value	Prime Advantage Plus	Independent Choice	Prime Care Connect ¹	Out-of-Area Plan ¹
Employee Only	\$5,833.08	\$5,346.60	\$6,607.92	\$8,075.64	N/A	\$5,833.08
Employee + Children	\$10,791.24	\$9,891.24	\$12,224.64	\$14,939.88	N/A	\$10,791.24
Employee + Spouse	\$12,249.48	\$11,227.92	\$13,876.68	\$16,958.88	N/A	\$12,249.48
Family	\$18,228.36	\$16,708.08	\$20,649.72	\$25,236.36	N/A	\$18,228.36

¹ Enrollment in these plans requires meeting certain criteria and special application.
N/A = Not Available