

# 80/20 & 70/30 Plan for Active Employees Whose Dependent is Medicare Primary Due to ESRD

Monthly Premium Rates January 1, 2020 - December 31, 2020	80/20 PLAN		70/30 PLAN	
	TOBACCO ATTESTATION COMPLETE?*		TOBACCO ATTESTATION COMPLETE?*	
	YES	NO	YES	NO
<b>ACTIVE SUBSCRIBERS WITH ESRD DEPENDENT</b>				
Subscriber + Child(ren)	\$205.00	\$265.00	\$180.00	\$240.00
Subscriber + Spouse	\$475.00	\$535.00	\$450.00	\$510.00
Subscriber + Family	\$494.00	\$554.00	\$469.00	\$529.00
<b>ACTIVE SUBSCRIBERS (50% CONTRIBUTORY)</b>				
Subscriber + Child(ren)	\$471.18	\$531.18	\$446.18	\$506.18
Subscriber + Spouse	\$741.18	\$801.18	\$716.18	\$776.18
Subscriber + Family	\$760.18	\$820.18	\$735.18	\$795.18
<b>ACTIVE SUBSCRIBERS (COBRA &amp; 100% CONTRIBUTORY)</b>				
Subscriber + Child(ren)	\$737.36	\$797.36	\$712.36	\$772.36
Subscriber + Spouse	\$1,007.36	\$1,067.36	\$982.36	\$1,042.36
Subscriber + Family	\$1,026.36	\$1,086.36	\$1,001.36	\$1,061.36

**Notes:**

1. If your employment contract is for less than 12 months, contact your Health Benefits Representative or benefits office for monthly rates.
2. If you work for a local government employer, contact your Health Benefits Representative or benefits office for monthly rates.
3. The employer share for Active subscribers is \$532.36, or \$266.18 for 50% Contributory Active Subscribers.

\*Premium credit completed during enrollment period