

Village of Hoffman Estates

10/17/2018

Health and Dental Insurance Rates - as of 1/1/2019 (All Fire CBA employees)

Health Plan Premiums & Employee/Retiree/COBRA Rates						Medicare Eligible/COBRA Rates		
<b>PPO #1 PE1552</b>						<b>PPO #1 - PE1552</b>		
<b>BlueCrossBlueShield of IL</b>								
<u>Dependent Status</u>	<u>Premium/Mo</u>	<u>Employee %</u>	<u>Employee Rate</u>	<u>Retiree %</u>	<u>COBRA Rate</u>	<u>Dependent Status</u>	<u>Monthly Premium</u>	<u>COBRA Rate</u>
Single	\$823.57	12%	\$98.83	100%	\$840.04	Medicare Single	\$589.54	\$601.33
Family	\$1,952.72	12%	\$234.33	100%	\$1,991.77	Medicare Single +1	\$1,127.16	\$1,149.70
*or per Union contract						Medicare +1 Active	\$1,361.14	\$1,388.36
Rates effective through 12/31/19						Medicare + Fam	\$1,716.73	\$1,751.06
<b>PPO #2 P06987</b>						<b>PPO #2 - P06987</b>		
<b>BlueCrossBlueShield of IL</b>								
<u>Dependent Status</u>	<u>Premium/Mo</u>	<u>Employee %</u>	<u>Employee Rate</u>	<u>Retiree %</u>	<u>COBRA Rate</u>	<u>Dependent Status</u>	<u>Monthly Premium</u>	<u>COBRA Rate</u>
Single	\$876.93	5%	\$43.85	100%	\$894.47	Medicare Single	\$631.51	\$644.14
Family	\$2,061.46	7.5%	\$154.61	100%	\$2,102.69	Medicare Single +1	\$1,195.45	\$1,219.36
Rates effective through 12/31/19						Medicare +1 Active	\$1,500.07	\$1,530.07
						Medicare + Fam	\$1,816.03	\$1,852.35
<b>PPO #3 P06996</b>						<b>PPO #3 - P06996</b>		
<b>BlueCrossBlueShield of IL</b>								
<u>Dependent Status</u>	<u>Premium/Mo</u>	<u>Employee %</u>	<u>Employee Rate</u>	<u>Ret/PT** %</u>	<u>COBRA Rate</u>	<u>Dependent Status</u>	<u>Monthly Premium</u>	<u>COBRA Rate</u>
Single***	\$829.29	2%	\$16.59	100%	\$845.88	Medicare Single	\$598.31	\$610.28
Single + 1	\$1,659.45	4%	\$66.38	100%	\$1,692.64	Medicare Single +1	\$1,129.05	\$1,151.63
Family	\$2,041.66	5%	\$102.08	100%	\$2,082.49	Medicare +1 Active	\$1,427.58	\$1,456.13
Rates effective through 12/31/19								
***Certain PT employees > 4 years eligible for 2% co-pay				**PT < 4 yrs				
<b>HMO H00009</b>						<b>HMO - H00009</b>		
<b>BlueCrossBlueShield of IL</b>								
<u>Dependent Status</u>	<u>Premium/Mo</u>	<u>Employee %</u>	<u>Employee Rate</u>	<u>Retiree %</u>	<u>COBRA Rate</u>	<u>Dependent Status</u>	<u>Monthly Premium</u>	<u>COBRA Rate</u>
Single	\$633.72	12%	\$76.05	100%	\$646.39	Medicare Single	\$540.15	\$550.95
Family	\$1,877.13	12%	\$225.26	100%	\$1,914.67	Medicare Single +1	\$1,073.28	\$1,094.75
*or per Union contract						Medicare +1 Active	\$1,173.91	\$1,197.39
Rates only guaranteed through 12/31/19						Medicare + Family	\$1,783.55	\$1,819.22
<b>H.S.A. Option P66485 - Maximum Individual Contribution \$3,500 Maximum Family Contribution \$7,000</b>								
<u>Dependent Status</u>	<u>Premium/mo</u>	<u>Employee %</u>	<u>Employee Rate</u>	<u>Retiree %</u>	<u>COBRA Rate</u>	<u>Village Contributions</u>	<u>Maximum Employee Contributions</u>	
Single	\$725.80	11%	\$79.84	100%	\$740.32	\$1,056.00	\$2,444.00	
Family	\$1,732.16	11%	\$190.54	100%	\$1,766.80	\$2,382.00	\$4,618.00	

<b>MetLife Dental Employee/Retiree Premiums</b>					<b>COBRA</b>			
<u>Dependent Status</u>	<u>PPO # 1 / mo</u>	<u>PPO #2 / mo</u>	<u>PPO #3 / mo</u>	<u>Emp/Ret %</u>		<u>PPO #1/mo</u>	<u>PPO#2/mo</u>	<u>PPO#3/mo</u>
Single	\$32.97	\$35.62	\$37.99	100%	Single	\$33.63	\$36.33	\$38.75
Single + 1	\$64.31	\$69.64	\$74.36	100%	Single + 1	\$65.60	\$71.03	\$75.85
Family	\$98.15	\$106.35	\$113.63	100%	Family	\$100.11	\$108.48	\$115.90