

**DIVISION OF STATE GROUP INSURANCE
STATE GROUP HEALTH INSURANCE PROGRAM
FOR FISCAL YEAR 1998-1999**

PREMIUM CONTRIBUTION TABLE							
Effective July 1, 1998 through December 31, 1998							
Category	Coverage	Biweekly Contribution			Monthly Contribution		
		State	Enrollee	Total	State	Enrollee	Total
Active Full-Time Employees	Single	88.66	13.01	101.67	177.33	26.02	203.35
	Family	181.31	46.79	228.10	362.62	93.58	456.20
	Spousal Program	228.10	0.00	228.10	456.20	0.00	456.20
COBRA Participants	Single	0.00	0.00	0.00	0.00	162.61	162.61
	Family	0.00	0.00	0.00	0.00	368.95	368.95
Early Retirees	Single	0.00	0.00	0.00	0.00	159.42	159.42
	Family	0.00	0.00	0.00	0.00	361.72	361.72
Medicare Participants	(I)One Eligible	0.00	0.00	0.00	0.00	84.78	84.78
	(II)One Under/Over	0.00	0.00	0.00	0.00	244.20	244.20
	(III)Both Eligible	0.00	0.00	0.00	0.00	169.56	169.56
Effective January 1, 1999 through June 30, 1999							
Category	Coverage	Biweekly Contribution			Monthly Contribution		
		State	Enrollee	Total	State	Enrollee	Total
Active Full-Time Employees	Single	88.66	14.96	103.62	177.33	29.92	207.25
	Family	181.31	53.80	235.11	362.62	107.61	470.23
	Spousal Program	235.11	0.00	235.11	470.23	0.00	470.23
COBRA Participants	Single	0.00	0.00	0.00	0.00	211.40	211.40
	Family	0.00	0.00	0.00	0.00	479.64	479.64
Early Retirees	Single	0.00	0.00	0.00	0.00	207.25	207.25
	Family	0.00	0.00	0.00	0.00	470.23	470.23
Medicare Participants	(I)One Eligible	0.00	0.00	0.00	0.00	110.21	110.21
	(II)One Under/Over	0.00	0.00	0.00	0.00	317.46	317.46
	(III)Both Eligible	0.00	0.00	0.00	0.00	220.42	220.42

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Premium Contribution Table

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