

**"2014 ACTIVE EMPLOYEE RATE SCHEDULE" for  
ACTIVE EMPLOYEES IN CSEA, NCCFT, DAI, PBA, SOA, COBA,  
and ORDINANCE #543 and COLLEGE ORDINANCE #543 :**

		Monthly Premium	Pay Period Withholding CSEA, DAI, PBA, SOA, COBA	Ord. #543 hired on/after 1/1/02 *	College Ord. #543 hired on/after 6/1/02 **	NCCFT Employees#	COBRA***	Domestic Partner Imputed Value
<b>Empire Plan:</b>								
Individual	1	\$ 771.54	\$0.00	\$19.29	\$38.58	\$1.78	\$ 786.97	*****
Family		\$1,714.19	\$0.00	\$85.71	\$85.71	\$13.82	\$1,748.47	
<b>HIP Plan:</b>								
Individual		\$803.76	16.11	\$35.40	\$101.82	\$17.89	\$819.84	\$803.76
Family		\$1,969.21	127.51	\$213.22	\$213.22	\$141.33	\$2,008.59	
<b>HIP Choice Plan:</b>								
Individual		\$1,061.07	\$144.77	\$164.05	\$183.34	\$146.55	\$1,082.29	\$1,061.07
Family		\$2,599.64	\$442.73	\$528.43	\$528.43	\$456.54	\$2,651.63	
<b>AETNA Standard Plan HMO:</b>								
Individual		\$1,054.97	\$141.72	\$161.00	\$180.29	\$143.50	\$1,076.07	\$1,054.97
Family		\$2,954.41	\$620.11	\$705.82	\$705.82	\$633.93	\$3,013.50	
<b>Blue Cross HMO Plan:</b>								
Individual		\$1,140.46	\$184.46	\$203.75	\$223.04	\$186.24	\$1,163.27	\$1,140.46
Family		\$2,965.21	\$625.51	\$711.22	\$711.22	\$639.33	\$3,024.51	
<b>HIP/VYTRA Network:</b>								
Individual		\$851.87	\$40.17	\$59.45	\$78.74	\$41.95	\$868.91	\$851.87
Family		\$2,087.05	\$186.43	\$272.14	\$272.14	\$200.25	\$2,128.79	
<b>DENTAL Plan:</b>								
Individual		\$46.75	\$0.00	\$0.00	\$0.00	\$0.00	\$47.69	\$46.75
Family		\$46.75	\$0.00	\$0.00	\$0.00	\$0.00	\$47.69	
<b>OPTICAL Plan:</b>								
Individual		\$9.20	\$0.00	\$0.00	\$0.00	\$0.00	\$9.38	\$9.20
Family		\$9.20	\$0.00	\$0.00	\$0.00	\$0.00	\$9.38	

\*Per Ordinance #4–2002, Ordinance #543 employees hired on/after 1/1/02 and earning an annual salary greater than \$30,000. must contribute 5% (individual plan) or 10% (family plan) of the cost of the health insurance premium. If the employee chooses a plan that is more in excess of the Empire Plan premium costly than the Empire Plan, the employee is are also responsible for the premium portion in excess of the Empire Plan premium.

\*\*The College Board of Trustees has authorized that College Ordinance #543 employees hired after 6/1/02 must contribute 10% (individual plan) or 10% (family plan) of the cost of the health insurance premium. If the employee chooses a plan that is more costly than the Empire Plan, the employee is also responsible for the premium portion in excess of the Empire Plan premium.

\*\*\*COBRA premiums include a 2% administrative service fee as authorized in the Federal Consolidated Omnibus Reconciliation Act (COBRA).

#The NCCFT contract stipulates "if the cost of health insurance premiums increases after the expiration of this contract and prior to the effective date provided for in a successor agreement, employees shall pay for any such increases through payroll deductions during the interim period." (Section 35-5)

\*\*\*\*\* Rate TBA

**Legend:**

1) Young Adult Option: Provides Coverage for Unmarried Young adults through Age 29.