

STATE HEALTH BENEFIT PLAN
Annuitant under 65 rates
JANUARY 1 - DECEMBER 31, 2014

	YOU	YOU + CHILD(REN)	YOU + SPOUSE	YOU + FAMILY
BCBS Gold	\$166.08	\$300.38	\$405.52	\$539.84
BCBS Silver	\$108.64	\$202.74	\$284.90	\$379.00
BCBS Bronze	\$66.28	\$130.74	\$195.96	\$260.40

NOTE: An additional \$80 will be added to the monthly premium shown above, if you or your covered dependents use Tobacco products.

Medicare Advantage	BCBSGa MA Premium	BCBSGa MA Standard
Retiree with Part B	\$ 53.14	\$25.38
Retiree & Spouse w/ Part B	\$170.28	\$50.76
Retiree & Child(ren) all w / Part B	\$170.28	\$50.76
Retiree, Spouse & Child(ren) all w/ Part B	\$255.42	\$76.14