

**STATE HEALTH BENEFIT PLAN
APPROVED LEAVE WITHOUT PAY
(other than FMLA, Disability, Military) RATES
JANUARY 1 - DECEMBER 31, 2015**

	YOU	YOU + CHILD(REN)	YOU + SPOUSE	YOU + FAMILY
BCBS Gold	\$ 590.32	\$ 1,003.54	\$ 1,239.67	\$ 1,652.90
BCBS Silver	\$ 531.92	\$ 904.26	\$ 1,117.03	\$ 1,489.38
BCBS Bronze	\$ 489.27	\$ 831.76	\$ 1,027.47	\$ 1,369.96
BCBS HMO	\$ 550.95	\$ 936.62	\$ 1,157.00	\$ 1,542.66
UHC HMO	\$ 601.53	\$ 1,022.60	\$ 1,263.21	\$ 1,684.28
UHC HDHP	\$ 473.23	\$ 804.49	\$ 993.78	\$ 1,325.04
Kaiser HMO	\$ 525.01	\$ 892.52	\$ 1,102.52	\$ 1,470.03