

**STATE HEALTH BENEFIT PLAN
BOARD OF EDUCATION MEMBER RATES
JANUARY 1 - DECEMBER 31, 2013**

STANDARD	YOU		YOU + CHILD(REN)		YOU + SPOUSE		YOU + FAMILY
UHC HMO	\$695.58		\$1,182.49		\$1,460.71		\$1,947.62
UHC HRA	\$789.92		\$1,342.86		\$1,658.83		\$2,211.77
UHC HDHP	\$745.60		\$1,267.52		\$1,565.76		\$2,087.67
CIGNA HMO	\$577.71		\$982.11		\$1,213.19		\$1,617.58
CIGNA HRA	\$656.05		\$1,115.29		\$1,377.71		\$1,836.95
CIGNA HDHP	\$619.24		\$1,052.71		\$1,300.41		\$1,733.88
WELLNESS	YOU		YOU + CHILD(REN)		YOU + SPOUSE		YOU + FAMILY
UHC HMO	\$726.00		\$1,234.19		\$1,524.59		\$2,032.79
UHC HRA	\$840.43		\$1,428.73		\$1,764.91		\$2,353.20
UHC HDHP	\$799.97		\$1,359.95		\$1,679.93		\$2,239.90
CIGNA HMO	\$602.96		\$1,025.04		\$1,266.22		\$1,688.29
CIGNA HRA	\$698.00		\$1,186.60		\$1,465.79		\$1,954.39
CIGNA HDHP	\$664.40		\$1,129.48		\$1,395.24		\$1,860.32

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