



STATE HEALTH BENEFIT PLAN BOARD OF EDUCATION MEMBER RATES JANUARY 1 - DECEMBER 31, 2014								
		YOU		YOU + CHILD(REN)		YOU + SPOUSE		YOU + FAMILY
BCBS Gold		\$845.10		\$1,436.66		\$1,774.70		\$2,366.27
BCBS Silver		\$760.47		\$1,292.80		\$1,596.99		\$2,129.31
BCBS Bronze		\$698.06		\$1,186.70		\$1,465.93		\$1,954.57

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