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MANAGEMENT ADVISORY #09-006

DATE: March 12, 2009
TO: Agency and University Personnel Officers and Benefit Coordinators
FROM: Suzetta Furlong, Manager
SUBJECT: Premium Rate Increases, May 2009 for June Coverage

As a result of legislative action, premium rates for the State Employees' Group Health Insurance Program under both the Standard Plans and the Health Investor Health Plan will increase for payrolls with warrant dates on or after May 1, 2009, for June 2009 coverage. Please see the tables on the next two pages for detailed rate information.

State Employees' Group Health Insurance Program Premium Rate Table

Standard Plans								
Category	Coverage Type	Code	Biweekly Contribution			Monthly Contribution		
			State	Enrollee	Total	State	Enrollee	Total
Active Full-Time Employees ⁽¹⁾	Single	01	224.34	25.00	249.34	448.68	50.00	498.68
	Family	02	473.87	90.00	563.87	947.74	180.00	1,127.74
	Spouse	22/89	563.87	0.00	563.87	1,127.74	0.00	1,127.74
COBRA Participants	Single ⁽²⁾	9	0.00	0.00	0.00	0.00	508.65	508.65
	Family ⁽²⁾	10	0.00	0.00	0.00	0.00	1,150.29	1,150.29
	Single ⁽³⁾	11	0.00	0.00	0.00	0.00	748.02	748.02
	Family ⁽³⁾	12	0.00	0.00	0.00	0.00	1,691.61	1,691.61
Early Retirees	Single	61	0.00	0.00	0.00	0.00	498.68	498.68
	Family	62	0.00	0.00	0.00	0.00	1,127.74	1,127.74
Medicare Participants ⁽⁴⁾⁽⁵⁾	Medicare I	63	0.00	0.00	0.00	0.00	264.78	264.78
	Medicare II	64	0.00	0.00	0.00	0.00	763.46	763.46
	Medicare III	65	0.00	0.00	0.00	0.00	529.56	529.56

Notes:

(1) Premium contribution for Part-Time Employees is to be calculated as follows:

Step 1. State Contribution x FTE% = Calculated State Contribution

Step 2. Total Contribution - Calculated State Contribution = Employee Contribution

(2) Includes an additional 2% charge per federal regulations.

(3) Includes an additional 50% charge per federal regulations for extended COBRA.

(4) Medicare 1 = Individual policy; enrollee is Medicare eligible due to age (typically 65) or disability.

Medicare 2 = Family plan covering at least one person who is eligible for Medicare.

Medicare 3 = Family policy covering only two people and both are Medicare eligible.

(5) Premium rates do not apply to Medicare retirees enrolled in an HMO plan.

State Employees' Group Health Insurance Program Premium Rate Table

Health Investor Health Plans								
Category	Coverage Type	Code	Biweekly Contribution			Monthly Contribution		
			State	Enrollee	Total	State	Enrollee	Total
Active Full-Time Employees ⁽¹⁾⁽⁶⁾	Single	01	224.34	7.50	231.84	448.68	15.00	463.68
	Family	02	473.87	32.15	506.02	947.74	64.30	1,012.04
	Spouse	22/89	506.02	0.00	506.02	1,012.04	0.00	1,012.04
COBRA Participants	Single ⁽²⁾	9	0.00	0.00	0.00	0.00	430.45	430.45
	Family ⁽²⁾	10	0.00	0.00	0.00	0.00	947.28	947.28
	Single ⁽³⁾	11	0.00	0.00	0.00	0.00	633.02	633.02
	Family ⁽³⁾	12	0.00	0.00	0.00	0.00	1,393.08	1,393.08
Early Retirees	Single	61	0.00	0.00	0.00	0.00	422.02	422.02
	Family	62	0.00	0.00	0.00	0.00	928.72	928.72
Medicare Participants ⁽⁴⁾⁽⁵⁾	Medicare I	63	0.00	0.00	0.00	0.00	199.58	199.58
	Medicare II	64	0.00	0.00	0.00	0.00	659.40	659.40
	Medicare III	65	0.00	0.00	0.00	0.00	399.16	399.16

Notes:

(1) Premium contribution for Part-Time Employees is to be calculated as follows:

Step 1. State Contribution x FTE% = Calculated State Contribution

Step 2. Total Contribution - Calculated State Contribution = Employee Contribution

(2) Includes an additional 2% charge per federal regulations.

(3) Includes an additional 50% charge per federal regulations for extended COBRA.

(4) Medicare 1 = Individual policy; enrollee is Medicare eligible due to age (typically 65) or disability.

Medicare 2 = Family plan covering at least one person who is eligible for Medicare.

Medicare 3 = Family policy covering only two people and both are Medicare eligible.

(5) Premium rates do not apply to Medicare retirees enrolled in an HMO plan.

(6) The employer monthly HSA contribution of \$41.66/single (\$500 annually) and \$83.33/family (\$1,000 annually) is included in the listed employer rates.