| | | MONTHLY HEALT | H INSURANCE PRI | EMIUMS FOR ACT | TIVE EMPLOYEES | | |
|---|-----------------------|----------------------|-----------------|------------------------------------|---------------------|-------------------------|-----------------------------|
| Effective January 1, 2022 - December 31, 2022 | | | | | | | |
| | LSU First Option 1 | Pelican HRA 1000 | Pelican HSA 775 | Magnolia Local Designated Regions | Magnolia Local Plus | Magnolia Open Access | Vantage Medical Home HMO |
| | | | 12 Month Emp | oloyee Share | | | |
| Employee Only | \$202.64 | \$122.74 | \$70.96 | \$166.48 | \$196.44 | \$204.20 | \$205.32 |
| Employee + Spouse | \$595.62 | \$398.70 | \$230.64 | \$540.90 | \$638.02 | \$663.40 | \$666.96 |
| Employee+ Children | \$313.84 | \$176.76 | \$102.28 | \$239.62 | \$282.72 | \$293.96 | \$295.50 |
| Employee + Family | \$730.82 | \$427.14 | \$247.06 | \$579.58 | \$683.62 | \$710.80 | \$714.60 |
| | | | 9 Month Emp | loyee Share | | | |
| Employee Only | \$270.19 | \$163.65 | \$94.61 | \$221.97 | \$261.92 | \$272.27 | \$273.76 |
| Employee + Spouse | \$794.16 | \$531.60 | \$307.52 | \$721.20 | \$850.69 | \$884.53 | \$889.28 |
| Employee + Children | \$418.45 | \$235.68 | \$136.37 | \$319.49 | \$376.96 | \$391.95 | \$394.00 |
| Employee + Family | \$974.43 | \$569.52 | \$329.41 | \$772.77 | \$911.49 | \$947.73 | \$952.80 |
| | | | State S | hare | | | |
| Employee Only | \$607.94 | \$368.28 | \$213.02 | \$499.60 | \$589.44 | \$612.76 | \$616.20 |
| Employee + Spouse | \$1,000.90 | \$644.24 | \$372.70 | \$873.94 | \$1,031.12 | \$1,071.98 | \$1,077.82 |
| Employee + Children | \$719.14 | \$422.30 | \$244.28 | \$572.72 | \$675.70 | \$702.50 | \$706.38 |
| Employee + Family | \$1,136.12 | \$672.72 | \$389.14 | \$912.60 | \$1,076.70 | \$1,119.40 | \$1,125.48 |
| Total Premium | | | | | | | |
| Employee Only | \$810.58 | \$491.02 | \$283.98 | \$666.08 | \$785.88 | \$816.96 | \$821.52 |
| Employee + Spouse | \$1,596.52 | \$1,042.94 | \$603.34 | \$1,414.84 | \$1,669.14 | \$1,735.38 | \$1,744.78 |
| Employee + Children | \$1,032.98 | \$599.06 | \$346.56 | \$812.34 | \$958.42 | \$996.46 | \$1,001.88 |
| Employee + Family | \$1,866.94 | \$1,099.86 | \$636.20 | \$1,492.18 | \$1,760.32 | \$1,830.20 | \$1,840.08 |
| COBRA Premium | | | | | | | |
| Employee Only | \$826.79 | \$500.86 | \$289.68 | \$679.38 | \$801.60 | \$833.30 | \$837.94 |
| Employee + Spouse | \$1,625.45 | \$1,063.78 | \$615.38 | \$1,443.14 | \$1,702.50 | \$1,770.06 | \$1,779.66 |
| Employee + Children | \$1,053.64 | \$611.04 | \$353.50 | \$828.58 | \$977.60 | \$1,016.36 | \$1,021.90 |
| Employee + Family | \$1,904.28 | \$1,121.84 | \$648.92 | \$1,522.00 | \$1,795.50 | \$1,866.78 | \$1,876.90 |
| | | | | | | | |