

MONTHLY HEALTH INSURANCE PREMIUMS FOR ACTIVE EMPLOYEES
Effective January 1, 2021 - December 31, 2021

| | 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 Employee Share | | | | | | | |
| Employee Only | \$199.42 | \$116.90 | \$67.58 | \$158.56 | \$187.08 | \$194.48 | \$186.66 |
| Employee + Spouse | \$576.56 | \$379.72 | \$219.66 | \$515.14 | \$607.64 | \$631.80 | \$606.32 |
| Employee+ Children | \$287.02 | \$168.34 | \$97.40 | \$228.20 | \$269.26 | \$279.96 | \$268.64 |
| Employee + Family | \$690.26 | \$406.80 | \$235.30 | \$551.98 | \$651.06 | \$676.96 | \$649.64 |
| 9 Month Employee Share | | | | | | | |
| Employee Only | \$265.89 | \$155.87 | \$90.11 | \$211.41 | \$249.44 | \$259.31 | \$248.88 |
| Employee + Spouse | \$768.75 | \$506.29 | \$292.88 | \$686.85 | \$810.19 | \$842.40 | \$808.43 |
| Employee + Children | \$382.69 | \$224.45 | \$129.87 | \$304.27 | \$359.01 | \$373.28 | \$358.19 |
| Employee + Family | \$920.35 | \$542.40 | \$313.73 | \$735.97 | \$868.08 | \$902.61 | \$866.19 |
| State Share | | | | | | | |
| Employee Only | \$598.26 | \$350.74 | \$202.88 | \$475.80 | \$561.38 | \$583.58 | \$560.18 |
| Employee + Spouse | \$975.42 | \$613.56 | \$354.94 | \$832.32 | \$982.02 | \$1,020.94 | \$979.84 |
| Employee + Children | \$685.84 | \$402.20 | \$232.66 | \$545.46 | \$643.52 | \$669.04 | \$642.16 |
| Employee + Family | \$1,089.08 | \$640.68 | \$370.60 | \$869.14 | \$1,025.44 | \$1,066.08 | \$1,023.16 |
| Total Premium | | | | | | | |
| Employee Only | \$797.68 | \$467.64 | \$270.46 | \$634.36 | \$748.46 | \$778.06 | \$746.84 |
| Employee + Spouse | \$1,551.98 | \$993.28 | \$574.60 | \$1,347.46 | \$1,589.66 | \$1,652.74 | \$1,586.16 |
| Employee + Children | \$972.86 | \$570.54 | \$330.06 | \$773.66 | \$912.78 | \$949.00 | \$910.80 |
| Employee + Family | \$1,779.34 | \$1,047.48 | \$605.90 | \$1,421.12 | \$1,676.50 | \$1,743.04 | \$1,672.80 |
| COBRA Premium | | | | | | | |
| Employee Only | \$813.63 | \$477.00 | \$275.88 | \$647.02 | \$763.42 | \$793.62 | \$761.76 |
| Employee + Spouse | \$1,583.03 | \$1,013.12 | \$586.08 | \$1,374.42 | \$1,621.42 | \$1,685.78 | \$1,617.88 |
| Employee + Children | \$992.31 | \$581.94 | \$336.66 | \$789.12 | \$931.04 | \$967.96 | \$929.00 |
| Employee + Family | \$1,814.91 | \$1,068.42 | \$618.02 | \$1,449.52 | \$1,710.00 | \$1,777.88 | \$1,706.28 |