

Health Rates 75% Vesting Jan 2021 - Dec 2021

EMP = This is the amount paid by the retiree

Effective January 2021	Magnolia Local			Magnolia Local Plus			Magnolia Open Access		
	STATE	EMP	TOTAL	STATE	EMP	TOTAL	STATE	EMP	TOTAL
Retiree only Coverage									
Retired -No Medicare	1021.68	158.56	1180.24	1209.84	187.08	1396.92	1253.14	194.48	1447.62
Retired w/ Medicare	287.84	95.94	383.78	346.62	115.52	462.14	353.06	117.68	470.74
Retiree and Spouse									
none on Medicare	1568.92	515.14	2084.06	1858.94	607.64	2466.58	1924.46	631.80	2556.26
1 with Medicare	1063.54	354.50	1418.04	1266.76	422.26	1689.02	1304.52	434.80	1739.32
2 with Medicare	517.42	172.46	689.88	621.32	207.08	828.40	634.70	211.50	846.20
Retiree and Child-ren									
none on Medicare	1086.42	228.20	1314.62	1286.80	269.26	1556.06	1332.50	279.96	1612.46
1 with Medicare	498.20	166.08	664.28	596.22	198.74	794.96	611.08	203.72	814.80
Family									
none on Medicare	1555.46	518.50	2073.96	1841.06	613.68	2454.74	1907.88	635.96	2543.84
1 with Medicare	1417.08	472.34	1889.42	1686.14	562.02	2248.16	1738.16	579.32	2317.48
2 with Medicare	640.66	213.54	854.20	769.24	256.40	1025.64	785.80	261.92	1047.72
Pelican HRA 1000									
	STATE	EMP	TOTAL	STATE	EMP	TOTAL	STATE	EMP	TOTAL
Retiree only Coverage									
Retired -No Medicare	753.18	116.90	870.08	1207.20	186.66	1393.86	200.00	0.00	200.00
Retired w/ Medicare	212.22	70.74	282.96	345.86	115.26	461.12	200.00	0.00	200.00
Retiree and Spouse									
none on Medicare	1156.60	379.72	1536.32	1854.86	606.32	2461.18	300.00	0.00	300.00
1 with Medicare	784.02	261.32	1045.34	1264.00	421.32	1685.32	300.00	0.00	300.00
2 with Medicare	381.46	127.12	508.58	619.94	206.64	826.58	300.00	0.00	300.00
Retiree and Child-ren									
none on Medicare	801.14	168.34	969.48	1284.02	268.64	1552.66	0.00	0.00	0.00
1 with Medicare	367.44	122.44	489.88	594.96	198.28	793.24	0.00	0.00	0.00
Family									
none on Medicare	1146.54	382.18	1528.72	1837.02	612.34	2449.36	0.00	0.00	0.00
1 with Medicare	1044.52	348.18	1392.70	1682.44	560.80	2243.24	0.00	0.00	0.00
2 with Medicare	472.24	157.40	629.64	767.56	255.84	1023.40	0.00	0.00	0.00
LSU First Option 1									
	STATE	EMP	TOTAL	STATE	EMP	TOTAL			
Retiree only Coverage									
Retired -No Medicare	1284.70	199.42	1484.12	N/A	N/A	N/A			
Retired w/ Medicare	359.56	119.84	479.40	316.45	105.48	421.93			
Retiree and Spouse									
none on Medicare	1972.88	576.56	2549.44	N/A	N/A	N/A			
1 with Medicare	1276.42	425.48	1701.90	N/A	N/A	N/A			
2 with Medicare	640.00	213.30	853.30	632.90	210.96	843.86			
Retiree and Child-ren									
none on Medicare	1366.04	287.02	1653.06	N/A	N/A	N/A			
1 with Medicare	626.48	208.82	835.30	N/A	N/A	N/A			
2 with Medicare	N/A	N/A	N/A	632.90	210.96	843.86			
Family									
none on Medicare	1955.90	651.98	2607.88	N/A	N/A	N/A			
1 with Medicare	1761.88	587.28	2349.16	N/A	N/A	N/A			
2 with Medicare	805.58	268.52	1074.10	N/A	N/A	N/A			
3 with Medicare	N/A	N/A	N/A	949.35	316.44	1265.79			

Additional choices for Retirees and Spouses who are enrolled in **BOTH** Medicare A and B are available.

For more information on these plans call the Office of Group Benefits at 1-800-272-8451.

	Vantage Standard Statewide HMO			Vantage Premium HMO-POS Statewide HMO			Peoples Health HMO-POS Regional HMO Plan		
	V01			V02			P01		
	STATE	EMP	TOTAL	STATE	EMP	TOTAL	STATE	EMP	TOTAL
Retiree only Coverage w/ Medicare	114.00	38.00	152.00	140.25	46.75	187.00	142.50	47.50	190.00
Retiree and Spouse 2 with Medicare	228.00	76.00	304.00	280.50	93.50	374.00	285.00	95.00	380.00
	Vantage Basic V03			Blue Adv Medicare Advantage Regions 1			Blue Adv Medicare Advantage Regions 2 & 5		
	STATE	EMP	TOTAL	STATE	EMP	TOTAL	STATE	EMP	TOTAL
	Retiree only Coverage w/ Medicare	54.00	18.00	72.00	123.75	41.25	165.00	157.50	52.50
Retiree and Spouse 2 with Medicare	108.00	36.00	144.00	247.50	82.50	330.00	315.00	105.00	420.00
	Blue Adv Medicare Advantage Regions 3,4			Blue Adv Medicare Advantage Region 6,7,8			Blue Adv Medicare Advantage Region 9		
	STATE	EMP	TOTAL	STATE	EMP	TOTAL	STATE	EMP	TOTAL
	Retiree only Coverage w/ Medicare	135.00	45.00	180.00	191.25	63.75	255.00	146.25	48.75
Retiree and Spouse 2 with Medicare	270.00	90.00	360.00	382.50	127.50	510.00	292.50	97.50	390.00
	Humana HMO Region 1			Humana HMO Region 2			Humana HMO Region 3		
	STATE	EMP	TOTAL	STATE	EMP	TOTAL	STATE	EMP	TOTAL
	Retiree only Coverage w/ Medicare	0.00	0.00	0.00	116.64	38.88	155.52	87.69	29.23
Retiree and Spouse 2 with Medicare	0.00	0.00	0.00	233.28	77.76	311.04	175.38	58.46	233.84
	Humana HMO Region 4			Humana HMO Region 5			Humana HMO Region 6		
	STATE	EMP	TOTAL	STATE	EMP	TOTAL	STATE	EMP	TOTAL
	Retiree only Coverage w/ Medicare	116.97	39.00	155.97	100.13	33.38	133.51	143.49	47.84
Retiree and Spouse 2 with Medicare	233.95	77.99	311.94	200.26	66.76	267.02	286.99	95.67	382.66
	Humana HMO Region 7			Humana HMO Region 8			Humana HMO Region 9		
	STATE	EMP	TOTAL	STATE	EMP	TOTAL	STATE	EMP	TOTAL
	Retiree only Coverage w/ Medicare	149.26	49.76	199.02	135.4	45.14	180.54	145.23	48.42
Retiree and Spouse 2 with Medicare	298.53	99.51	398.04	270.81	90.27	361.08	290.47	96.83	387.3

Premiums based on 75% vesting. Please contact your local Human Resources for additional vesting schedules