

# Oklahoma State and Education Employees Group Insurance Board

## Monthly Premiums for Current Employees Plan Year January 1, 2010 - December 31, 2010

HEALTH PLANS		MEMBER	SPOUSE	CHILD	CHILDREN
HealthChoice High		\$442.80	\$625.88	\$228.32	\$342.44
HealthChoice Basic		\$384.22	\$546.84	\$200.36	\$300.88
HealthChoice S-Account		\$365.80	\$513.68	\$190.32	\$283.98
HealthChoice USA		\$678.57	\$678.57	\$226.33	\$339.31
Aetna Standard HMO		\$715.40	\$951.38	\$488.78	\$782.04
Aetna Alternative HMO		\$502.32	\$668.02	\$343.20	\$549.12
CommunityCare Standard HMO		\$775.08	\$1,108.34	\$387.54	\$620.06
CommunityCare Alternative HMO		\$534.54	\$764.38	\$267.28	\$427.64
GlobalHealth Standard HMO		\$344.18	\$510.70	\$184.56	\$294.30
GlobalHealth Alternative HMO		\$312.90	\$464.30	\$167.82	\$267.54
PacifiCare Standard HMO		\$605.20	\$870.16	\$302.38	\$483.92
PacifiCare Alternative HMO		\$417.38	\$600.10	\$208.52	\$333.72
DISABILITY (Employee only)			\$9.10	(Limited county participation only)	
DENTAL PLANS		MEMBER	SPOUSE	CHILD	CHILDREN
HealthChoice Dental		\$30.28	\$30.28	\$25.24	\$65.50
Assurant Freedom Preferred		\$28.33	\$26.18	\$19.63	\$52.79
Assurant Heritage Plus with SBA (Prepaid)		\$11.70	\$8.86	\$7.60	\$15.20
Assurant Heritage Secure (Prepaid)		\$7.20	\$5.98	\$5.20	\$10.38
CIGNA Dental Care Plan (Prepaid)		\$5.26	\$6.06	\$7.08	\$15.32
Delta Dental PPO (POS)		\$30.48	\$30.50	\$26.80	\$68.22
Delta's Choice (PPO)		\$13.40	\$30.44	\$30.68	\$74.46
VISION PLANS - Employee Paid		MEMBER	SPOUSE	CHILD	CHILDREN
Humana/CompBenefits VisionCare Plan		\$6.76	\$5.06	\$3.57	\$ 4.46
Primary Vision Care Services		\$9.25	\$8.00	\$8.50	\$10.75
Superior Vision Plan		\$6.98	\$6.90	\$6.60	\$ 6.60
UnitedHealthcare Vision		\$8.18	\$5.79	\$4.59	\$ 6.98
Vision Service Plan (VSP)		\$8.96	\$6.00	\$5.74	\$12.92
LIFE					
HealthChoice Basic Life (\$20,000)		\$4.56	First \$20,000 of Supplemental Life \$4.56		
Age-Rated Supplemental Life – Cost Per \$20,000					
< 30 ----- \$1.00		45 - 49 ----- \$ 3.80		65 - 69 ----- \$19.80	
30 - 34 ----- \$1.00		50 - 54 ----- \$ 6.40		70 - 74 ----- \$33.40	
35 - 39 ----- \$1.60		55 - 59 ----- \$10.40		75+ ----- \$52.00	
40 - 44 ----- \$2.40		60 - 64 ----- \$12.00			
DEPENDENT	Low Option \$2.60		Standard Option \$4.32		Premier Option \$8.64
Spouse	\$6,000		\$10,000		\$20,000
Child (age 6 months to 25)	\$3,000		\$5,000		\$10,000
Child (live birth to 6 months)	\$1,000		\$1,000		\$1,000

*Amounts paid by your employer must be subtracted from the premiums listed above*