

A RESOLUTION

State Health Benefit Plan Calendar Year 2011 Contribution Rates for Active Employees/Annuitants Not Eligible for Medicare and for Other Individuals Eligible for SHBP Coverage

WHEREAS, the State Health Benefit Plan is comprised of three health insurance plans, each supported by its own fund: 1) a plan for State employees (O.C.G.A. § 45-18-2), which is funded in part by State departments and agencies and other entities authorized by law to contract with the Department of Community Health for inclusion, and in part by the employees and retirees of these entities, and two plans funded in part by the Department of Education, local school systems, libraries and RESAs, and their employees and retirees: 2) a plan for teachers (O.C.G.A. § 20-2-891) and 3) a plan for non-certificated public school employees (O.C.G.A. § 20-2-911); and

WHEREAS, O.C.G.A. §§ 45-18-14, 20-2-892, and 20-2-920 authorize the Board of Community Health (the "Board") to establish rates for individuals who meet the definition of "employee" under O.C.G.A. § 45-18-1(2) or § 20-2-880(4), or "public school employee" under O.C.G.A. § 20-2-910(3), including annuitants under certain statewide retirement systems, and

WHEREAS, the rates established by the Board represent the employee's share of the cost of coverage under the plan in which he or she is enrolled; and

WHEREAS, O.C.G.A. § 20-2-920 directs the Board to establish employee rates for the plan for non-certificated public school employees in a manner that maintains these rates consistent with the rates for other health insurance plans administered by the Board; and

WHEREAS, the Appropriations Act for FY2011 recommended an average 10 percent employee premium increase; and

WHEREAS, expansion of SHBP coverage to adult children under age twenty-six mandated by the federal Patient Protection and Affordable Care Act of 2010 necessitated an additional employee premium increase for employees with dependent coverage to offset a portion of the additional cost of such coverage; and

WHEREAS, Attachment A includes the Calendar Year contribution rates for active employees and annuitants who are not eligible for Medicare, rates for individuals who are eligible for SHBP coverage under State and federal extended coverage laws, and rates for individuals who are eligible for SHBP coverage as a result of a contractual relationship with the Board authorized by statute;

NOW, THEREFORE, BE IT ORDERED by the Board that the rates set forth in Attachment A are approved for an effective date of coverage of January 1, 2011; and

NOW, THEREFORE, BE IT FURTHER ORDERED by the Board that the Commissioner shall execute and amend agreements as necessary to implement these rates; and

NOW, THEREFORE, BE IT FURTHER ORDERED by the Board that the Commissioner shall establish such additional rates as may be administratively necessary for the operation of the Plan.

Resolved this 26th day of August 2010, in public session.

Handwritten signature of Ross Mason in blue ink, written in a cursive style.

ROSS MASON
Vice-Chairman

Handwritten signature of Archer R. Rose in blue ink, written in a cursive style.

ARCHER R. ROSE
Secretary

State Health Benefit Plan

Attachment A

Monthly Premium Rates for Active Members, Early Retirees,
Employees on FMLA/Disability/Military Leave w/o Pay
Plan Year 2011 - January 1, 2011 through December 31, 2011

Active Employee, *Early Retiree, & Employees on FMLA/Disability/Military Leave w/o Pay	EE	EE & CH	EE & SP	EE & SP & CH
United Healthcare HMO	\$110.22	\$264.27	\$260.15	\$284.94
United Healthcare HMO Tobacco	\$190.22	\$344.27	\$340.15	\$364.94
United Healthcare HMO Spouse	NA	NA	\$310.15	\$334.94
United Healthcare HMO Tobacco & Spouse	NA	NA	\$390.15	\$414.94
United Healthcare HRA	\$68.75	\$215.16	\$210.10	\$228.28
United Healthcare HRA Tobacco	\$148.75	\$295.16	\$290.10	\$308.28
United Healthcare HRA Spouse	NA	NA	\$260.10	\$278.28
United Healthcare HRA Tobacco & Spouse	NA	NA	\$340.10	\$358.28
United Healthcare HDHP	\$59.84	\$199.02	\$194.15	\$210.86
United Healthcare HDHP Tobacco	\$139.84	\$279.02	\$274.15	\$290.86
United Healthcare HDHP Spouse	NA	NA	\$244.15	\$260.86
United Healthcare HDHP Tobacco & Spouse	NA	NA	\$324.15	\$340.86
Cigna HMO	\$110.22	\$264.27	\$260.15	\$284.94
Cigna HMO Tobacco	\$190.22	\$344.27	\$340.15	\$364.94
Cigna HMO Spouse	NA	NA	\$310.15	\$334.94
Cigna HMO Tobacco & Spouse	NA	NA	\$390.15	\$414.94
Cigna HRA	\$68.75	\$215.16	\$210.10	\$228.28
Cigna HRA Tobacco	\$148.75	\$295.16	\$290.10	\$308.28
Cigna HRA Spouse	NA	NA	\$260.10	\$278.28
Cigna HRA Tobacco & Spouse	NA	NA	\$340.10	\$358.28
Cigna HDHP	\$59.84	\$199.02	\$194.15	\$210.86
Cigna HDHP Tobacco	\$139.84	\$279.02	\$274.15	\$290.86
Cigna HDHP Spouse	NA	NA	\$244.15	\$260.86
Cigna HDHP Tobacco & Spouse	NA	NA	\$324.15	\$340.86

*Early retiree - Retiree under age 65 without Medicare
Tobacco - Tobacco Surcharge
Spouse - Spousal Surcharge

State Health Benefit Plan

Attachment A

Monthly Premium Rates for Active Members, Early Retirees,
Employees on FMLA/Disability/Military Leave w/o Pay
Plan Year 2011 - January 1, 2011 through December 31, 2011

Education, Employee/Employer Convenience Leave w/o Pay or Suspension w/o Pay	EE	EE & CH	EE & SP	EE & SP & CH
United HMO	\$439.17	\$829.92	\$1,003.59	\$1,307.51
United HMO Tobacco	\$519.17	\$909.92	\$1,083.59	\$1,387.51
United HMO Spouse	NA	NA	\$1,053.59	\$1,357.51
United HMO Tobacco & Spouse	NA	NA	\$1,133.59	\$1,437.51
United HRA	\$409.88	\$774.28	\$936.23	\$1,219.65
United HRA Tobacco	\$489.88	\$854.28	\$1,016.23	\$1,299.65
United HRA Spouse	NA	NA	\$986.23	\$1,269.65
United HRA Tobacco & Spouse	NA	NA	\$1,066.23	\$1,349.65
United HDHP	\$363.83	\$686.77	\$830.30	\$1,081.48
United HDHP Tobacco	\$443.83	\$766.77	\$910.30	\$1,161.48
United HDHP Spouse	NA	NA	\$880.30	\$1,131.48
United HDHP Tobacco & Spouse	NA	NA	\$960.30	\$1,211.48
Cigna HMO	\$400.10	\$755.69	\$913.73	\$1,190.30
Cigna HMO Tobacco	\$480.10	\$835.69	\$993.73	\$1,270.30
Cigna HMO Spouse	NA	NA	\$963.73	\$1,240.30
Cigna HMO Tobacco & Spouse	NA	NA	\$1,043.73	\$1,320.30
Cigna HRA	\$409.88	\$774.28	\$936.23	\$1,219.65
Cigna HRA Tobacco	\$489.88	\$854.28	\$1,016.23	\$1,299.65
Cigna HRA Spouse	NA	NA	\$986.23	\$1,269.65
Cigna HRA Tobacco & Spouse	NA	NA	\$1,066.23	\$1,349.65
Cigna HDHP	\$363.83	\$686.77	\$830.30	\$1,081.48
Cigna HDHP Tobacco	\$443.83	\$766.77	\$910.30	\$1,161.48
Cigna HDHP Spouse	NA	NA	\$880.30	\$1,131.48
Cigna HDHP Tobacco & Spouse	NA	NA	\$960.30	\$1,211.48

State Health Benefit Plan

Attachment A

Monthly Premium Rates for Active Members, Early Retirees,
Employees on FMLA/Disability/Military Leave w/o Pay
Plan Year 2011 - January 1, 2011 through December 31, 2011

COBRA Temporary Extended Coverage (18-36)	EE	EE & CH	EE & SP	EE & SP & CH
United Healthcare HMO	\$442.85	\$841.42	\$1,018.56	\$1,328.56
United Healthcare HMO Tobacco	\$522.85	\$921.42	\$1,098.56	\$1,408.56
United Healthcare HMO Spouse	N/A	N/A	\$1,068.56	\$1,378.56
United Healthcare HMO Tobacco & Spouse	N/A	N/A	\$1,148.56	\$1,458.56
United Healthcare HRA	\$412.98	\$784.66	\$949.85	\$1,238.94
United Healthcare HRA Tobacco	\$492.98	\$864.66	\$1,029.85	\$1,318.94
United Healthcare HRA Spouse	N/A	N/A	\$999.85	\$1,288.94
United Healthcare HRA Tobacco & Spouse	N/A	N/A	\$1,079.85	\$1,368.94
United Healthcare HDHP	\$366.00	\$695.40	\$841.81	\$1,098.01
United Healthcare HDHP Tobacco	\$446.00	\$775.40	\$921.81	\$1,178.01
United Healthcare HDHP Spouse	N/A	N/A	\$891.81	\$1,148.01
United Healthcare HDHP Tobacco & Spouse	N/A	N/A	\$971.81	\$1,228.01
CIGNA HMO	\$403.00	\$765.70	\$926.90	\$1,209.00
CIGNA HMO Tobacco	\$483.00	\$845.70	\$1,006.90	\$1,289.00
CIGNA HMO Spouse	N/A	N/A	\$976.90	\$1,259.00
CIGNA HMO Tobacco & Spouse	N/A	N/A	\$1,056.90	\$1,339.00
CIGNA HRA	\$412.98	\$784.66	\$949.85	\$1,238.94
CIGNA HRA Tobacco	\$492.98	\$864.66	\$1,029.85	\$1,318.94
CIGNA HRA Spouse	N/A	N/A	\$999.85	\$1,288.94
CIGNA HRA Tobacco & Spouse	N/A	N/A	\$1,079.85	\$1,368.94
CIGNA HDHP	\$366.00	\$695.40	\$841.81	\$1,098.01
CIGNA HDHP Tobacco	\$446.00	\$775.40	\$921.81	\$1,178.01
CIGNA HDHP Spouse	N/A	N/A	\$891.81	\$1,148.01
CIGNA HDHP Tobacco & Spouse	N/A	N/A	\$971.81	\$1,228.01

Extended COBRA Coverage (additional 11 Months)	EE	EE & CH	EE & SP	EE & SP & CH
United Healthcare HMO	\$664.28	\$1,262.13	\$1,527.84	\$1,992.84
United Healthcare HMO Tobacco	\$744.28	\$1,342.13	\$1,607.84	\$2,072.84
United Healthcare HMO Spouse	N/A	N/A	\$1,577.84	\$2,042.84
United Healthcare HMO Tobacco & Spouse	N/A	N/A	\$1,657.84	\$2,122.84
United Healthcare HRA	\$619.47	\$1,176.99	\$1,424.78	\$1,858.41
United Healthcare HRA Tobacco	\$699.47	\$1,256.99	\$1,504.78	\$1,938.41
United Healthcare HRA Spouse	N/A	N/A	\$1,474.78	\$1,908.41
United Healthcare HRA Tobacco & Spouse	N/A	N/A	\$1,554.78	\$1,988.41
United Healthcare HDHP	\$549.00	\$1,043.10	\$1,262.72	\$1,647.02

State Health Benefit Plan

Attachment A

Monthly Premium Rates for Active Members, Early Retirees,
Employees on FMLA/Disability/Military Leave w/o Pay
Plan Year 2011 - January 1, 2011 through December 31, 2011

Extended COBRA Coverage (additional 11 Months) continued	EE	EE & CH	EE & SP	EE & SP & CH
United Healthcare HDHP Tobacco	\$629.00	\$1,123.10	\$1,342.72	\$1,727.02
United Healthcare HDHP Spouse	N/A	N/A	\$1,312.72	\$1,697.02
United Healthcare HDHP Tobacco & Spouse	N/A	N/A	\$1,392.72	\$1,777.02
CIGNA HMO	\$604.50	\$1,148.55	\$1,390.35	\$1,813.50
CIGNA HMO Tobacco	\$684.50	\$1,228.55	\$1,470.35	\$1,893.50
CIGNA HMO Spouse	N/A	N/A	\$1,440.35	\$1,863.50
CIGNA HMO Tobacco & Spouse	N/A	N/A	\$1,520.35	\$1,943.50
CIGNA HRA	\$619.47	\$1,176.99	\$1,424.78	\$1,858.41
CIGNA HRA Tobacco	\$699.47	\$1,256.99	\$1,504.78	\$1,938.41
CIGNA HRA Spouse	N/A	N/A	\$1,474.78	\$1,908.41
CIGNA HRA Tobacco & Spouse	N/A	N/A	\$1,554.78	\$1,988.41
CIGNA HDHP	\$549.00	\$1,043.10	\$1,262.72	\$1,647.02
CIGNA HDHP Tobacco	\$629.00	\$1,123.10	\$1,342.72	\$1,727.02
CIGNA HDHP Spouse	N/A	N/A	\$1,312.72	\$1,697.02
CIGNA HDHP Tobacco & Spouse	N/A	N/A	\$1,392.72	\$1,777.02

State Health Benefit Plan

Attachment A

Monthly Premium Rates for Active Members, Early Retirees,
Employees on FMLA/Disability/Military Leave w/o Pay
Plan Year 2011 - January 1, 2011 through December 31, 2011

Contract & Critical Access Hospital Groups	TOTAL PREMIUM EE	TOTAL PREMIUM EE & CH	TOTAL PREMIUM EE & SP	TOTAL PREMIUM EE & SP & CH
UHC HMO	\$434.17	\$824.92	\$998.59	\$1,302.51
UHC HMO Tobacco	\$514.17	\$904.92	\$1,078.59	\$1,382.51
UHC HMO Spouse	NA	NA	\$1,048.59	\$1,352.51
UHC HMO Tobacco & Spouse	NA	NA	\$1,128.59	\$1,432.51
UHC HRA	\$404.88	\$769.28	\$931.23	\$1,214.65
UHC HRA Tobacco	\$484.88	\$849.28	\$1,011.23	\$1,294.65
UHC HRA Spouse	NA	NA	\$981.23	\$1,264.65
UHC HRA Tobacco & Spouse	NA	NA	\$1,061.23	\$1,344.65
UHC HDHP	\$358.83	\$681.77	\$825.30	\$1,076.48
UHC HDHP Tobacco	\$438.83	\$761.77	\$905.30	\$1,156.48
UHC HDHP Spouse	NA	NA	\$875.30	\$1,126.48
UHC HDHP Tobacco & Spouse	NA	NA	\$955.30	\$1,206.48
Cigna HMO	\$395.10	\$750.69	\$908.73	\$1,185.30
Cigna HMO Tobacco	\$475.10	\$830.69	\$988.73	\$1,265.30
Cigna HMO Spouse	NA	NA	\$958.73	\$1,235.30
Cigna HMO Tobacco & Spouse	NA	NA	\$1,038.73	\$1,315.30
Cigna HRA	\$404.88	\$769.28	\$931.23	\$1,214.65
Cigna HRA Tobacco	\$484.88	\$849.28	\$1,011.23	\$1,294.65
Cigna HRA Spouse	NA	NA	\$981.23	\$1,264.65
Cigna HRA Tobacco & Spouse	NA	NA	\$1,061.23	\$1,344.65
Cigna HDHP	\$358.83	\$681.77	\$825.30	\$1,076.48
Cigna HDHP Tobacco	\$438.83	\$761.77	\$905.30	\$1,156.48
Cigna HDHP Spouse	NA	NA	\$875.30	\$1,126.48
Cigna HDHP Tobacco & Spouse	NA	NA	\$955.30	\$1,206.48

School Board Members Premium Rates

Exhibit A

Plan Year 2011 - January 1, 2011 through December 31, 2011

	Effective January 1, 2011				Effective January 1, 2011				Effective January 1, 2011				Effective January 1, 2011			
	SINGLE				EE & CH				EE & SP				FAMILY			
	Employee	Employer	Total		Employee	Employer	Total	Employee	Employer	Total	Employee	Employer	Total	Employee	Employer	Total
	Deduction	Contribution	Premium		Deduction	Contribution	Premium	Deduction	Contribution	Premium	Deduction	Contribution	Premium	Deduction	Contribution	Premium
UHC HMO	\$110.22	\$323.95	\$434.17		\$500.97	\$323.95	\$824.92	\$674.64	\$323.95	\$998.59	\$978.56	\$323.95	\$1,302.51	\$978.56	\$323.95	\$1,302.51
UHC HMO Tobacco	\$190.22	\$323.95	\$514.17		\$580.97	\$323.95	\$904.92	\$754.64	\$323.95	\$1,078.59	\$1,058.56	\$323.95	\$1,382.51	\$1,058.56	\$323.95	\$1,382.51
UHC HMO Spouse	NA	NA	NA		NA	NA	NA	\$724.64	\$323.95	\$1,048.59	\$1,028.56	\$323.95	\$1,352.51	\$1,028.56	\$323.95	\$1,352.51
UHC HMO Tobacco & Spouse	NA	NA	NA		NA	NA	NA	\$804.64	\$323.95	\$1,128.59	\$1,108.56	\$323.95	\$1,432.51	\$1,108.56	\$323.95	\$1,432.51
UHC HRA	\$68.75	\$336.13	\$404.88		\$433.15	\$336.13	\$769.28	\$595.10	\$336.13	\$931.23	\$878.52	\$336.13	\$1,214.65	\$878.52	\$336.13	\$1,214.65
UHC HRA Tobacco	\$148.75	\$336.13	\$484.88		\$513.15	\$336.13	\$849.28	\$675.10	\$336.13	\$1,011.23	\$968.52	\$336.13	\$1,294.65	\$968.52	\$336.13	\$1,294.65
UHC HRA Spouse	NA	NA	NA		NA	NA	NA	\$645.10	\$336.13	\$981.23	\$928.52	\$336.13	\$1,264.65	\$928.52	\$336.13	\$1,264.65
UHC HRA Tobacco & Spouse	NA	NA	NA		NA	NA	NA	\$725.10	\$336.13	\$1,061.23	\$1,008.52	\$336.13	\$1,344.65	\$1,008.52	\$336.13	\$1,344.65
UHC HDHP	\$59.84	\$298.99	\$358.83		\$382.78	\$298.99	\$681.77	\$526.31	\$298.99	\$825.30	\$777.49	\$298.99	\$1,076.48	\$777.49	\$298.99	\$1,076.48
UHC HDHP Tobacco	\$139.84	\$298.99	\$438.83		\$462.78	\$298.99	\$761.77	\$606.31	\$298.99	\$905.30	\$857.49	\$298.99	\$1,156.48	\$857.49	\$298.99	\$1,156.48
UHC HDHP Spouse	NA	NA	NA		NA	NA	NA	\$576.31	\$298.99	\$875.30	\$827.49	\$298.99	\$1,126.48	\$827.49	\$298.99	\$1,126.48
UHC HDHP Tobacco & Spouse	NA	NA	NA		NA	NA	NA	\$656.31	\$298.99	\$955.30	\$907.49	\$298.99	\$1,206.48	\$907.49	\$298.99	\$1,206.48
Cigna HMO	\$110.22	\$284.88	\$395.10		\$465.81	\$284.88	\$750.69	\$623.85	\$284.88	\$908.73	\$900.42	\$284.88	\$1,185.30	\$900.42	\$284.88	\$1,185.30
Cigna HMO Tobacco	\$190.22	\$284.88	\$475.10		\$545.81	\$284.88	\$830.69	\$703.85	\$284.88	\$988.73	\$980.42	\$284.88	\$1,265.30	\$980.42	\$284.88	\$1,265.30
Cigna HMO Spouse	NA	NA	NA		NA	NA	NA	\$673.85	\$284.88	\$958.73	\$950.42	\$284.88	\$1,235.30	\$950.42	\$284.88	\$1,235.30
Cigna HMO Tobacco & Spouse	NA	NA	NA		NA	NA	NA	\$753.85	\$284.88	\$1,038.73	\$1,030.42	\$284.88	\$1,315.30	\$1,030.42	\$284.88	\$1,315.30
Cigna HRA	\$68.75	\$336.13	\$404.88		\$433.15	\$336.13	\$769.28	\$595.10	\$336.13	\$931.23	\$878.52	\$336.13	\$1,214.65	\$878.52	\$336.13	\$1,214.65
Cigna HRA Tobacco	\$148.75	\$336.13	\$484.88		\$513.15	\$336.13	\$849.28	\$675.10	\$336.13	\$1,011.23	\$958.52	\$336.13	\$1,294.65	\$958.52	\$336.13	\$1,294.65
Cigna HRA Spouse	NA	NA	NA		NA	NA	NA	\$645.10	\$336.13	\$981.23	\$928.52	\$336.13	\$1,264.65	\$928.52	\$336.13	\$1,264.65
Cigna HRA Tobacco & Spouse	NA	NA	NA		NA	NA	NA	\$725.10	\$336.13	\$1,061.23	\$1,008.52	\$336.13	\$1,344.65	\$1,008.52	\$336.13	\$1,344.65
Cigna HDHP	\$59.84	\$298.99	\$358.83		\$382.78	\$298.99	\$681.77	\$526.31	\$298.99	\$825.30	\$777.49	\$298.99	\$1,076.48	\$777.49	\$298.99	\$1,076.48
Cigna HDHP Tobacco	\$139.84	\$298.99	\$438.83		\$462.78	\$298.99	\$761.77	\$606.31	\$298.99	\$905.30	\$857.49	\$298.99	\$1,156.48	\$857.49	\$298.99	\$1,156.48
Cigna HDHP Spouse	NA	NA	NA		NA	NA	NA	\$576.31	\$298.99	\$875.30	\$827.49	\$298.99	\$1,126.48	\$827.49	\$298.99	\$1,126.48
Cigna HDHP Tobacco & Spouse	NA	NA	NA		NA	NA	NA	\$656.31	\$298.99	\$955.30	\$907.49	\$298.99	\$1,206.48	\$907.49	\$298.99	\$1,206.48