

# North Carolina State Health Plan

for Teachers and State Employees

www.shpnc.org

## Monthly Contribution Rates for Twelve-Month Employees/Retirees for Benefit Year 2010-2011

Effective July 1, 2010

| Coverage Types   | EMPLOYEE / RETIREE MONTHLY CONTRIBUTION RATES |                        |                               |
|--|---|------------------------|-------------------------------|
|  | Basic Plan<br>70/30                           | Standard Plan<br>80/20 | State Monthly<br>Contribution |
| <b>Non-Medicare Active Employee / Retiree</b>                        |   |                        |                               |
| Employee / Retiree   | \$ –  | \$ –                   | \$ 410.80                     |
| Employee / Retiree + Child(ren)                                      | \$ 178.68                                     | \$ 237.62              | \$ 410.80                     |
| Employee / Retiree + Spouse  | \$ 460.36                                     | \$ 547.48              | \$ 410.80                     |
| Employee / Retiree + Family  | \$ 490.34                                     | \$ 580.44              | \$ 410.80                     |
| <b>Medicare Primary for Only Employee / Retiree</b>                  |   |                        |                               |
| Employee / Retiree   | \$ –  | \$ –                   | \$ 312.76                     |
| Employee / Retiree + Child(ren)                                      | \$ 187.60                                     | \$ 237.62              | \$ 312.76                     |
| Employee / Retiree + Spouse  | \$ 469.28                                     | \$ 547.48              | \$ 312.76                     |
| Employee / Retiree + Family  | \$ 499.26                                     | \$ 580.44              | \$ 312.76                     |
| <b>Medicare Primary for Only Dependent(s)</b>                        |   |                        |                               |
| Employee / Retiree   | \$ –  | \$ –                   | \$ 410.80                     |
| Employee / Retiree + Child(ren)                                      | \$ 127.12                                     | \$ 180.88              | \$ 410.80                     |
| Employee / Retiree + Spouse  | \$ 334.24                                     | \$ 408.72              | \$ 410.80                     |
| Employee / Retiree + Family  | \$ 364.20                                     | \$ 441.70              | \$ 410.80                     |
| <b>Medicare Primary for Both Employee / Retiree and Dependent(s)</b> |   |                        |                               |
| Employee / Retiree   | \$ –  | \$ –                   | \$ 312.76                     |
| Employee / Retiree + Child(ren)                                      | \$ 136.04                                     | \$ 180.88              | \$ 312.76                     |
| Employee / Retiree + Spouse  | \$ 343.14                                     | \$ 408.72              | \$ 312.76                     |
| Employee / Retiree + Family  | \$ 373.12                                     | \$ 441.70              | \$ 312.76                     |

### Notes:

- 1) If your employment contract is for less than 12 months, contact your Health Benefits Representative or benefits office for monthly rates.
- 2) If you are actively employed and you or your dependent(s) are Medicare eligible, the State Health Plan is the primary insurer and the Non-Medicare rates apply. An exception to this would be if you or your dependent(s) are Medicare eligible due to end stage renal disease (ESRD).