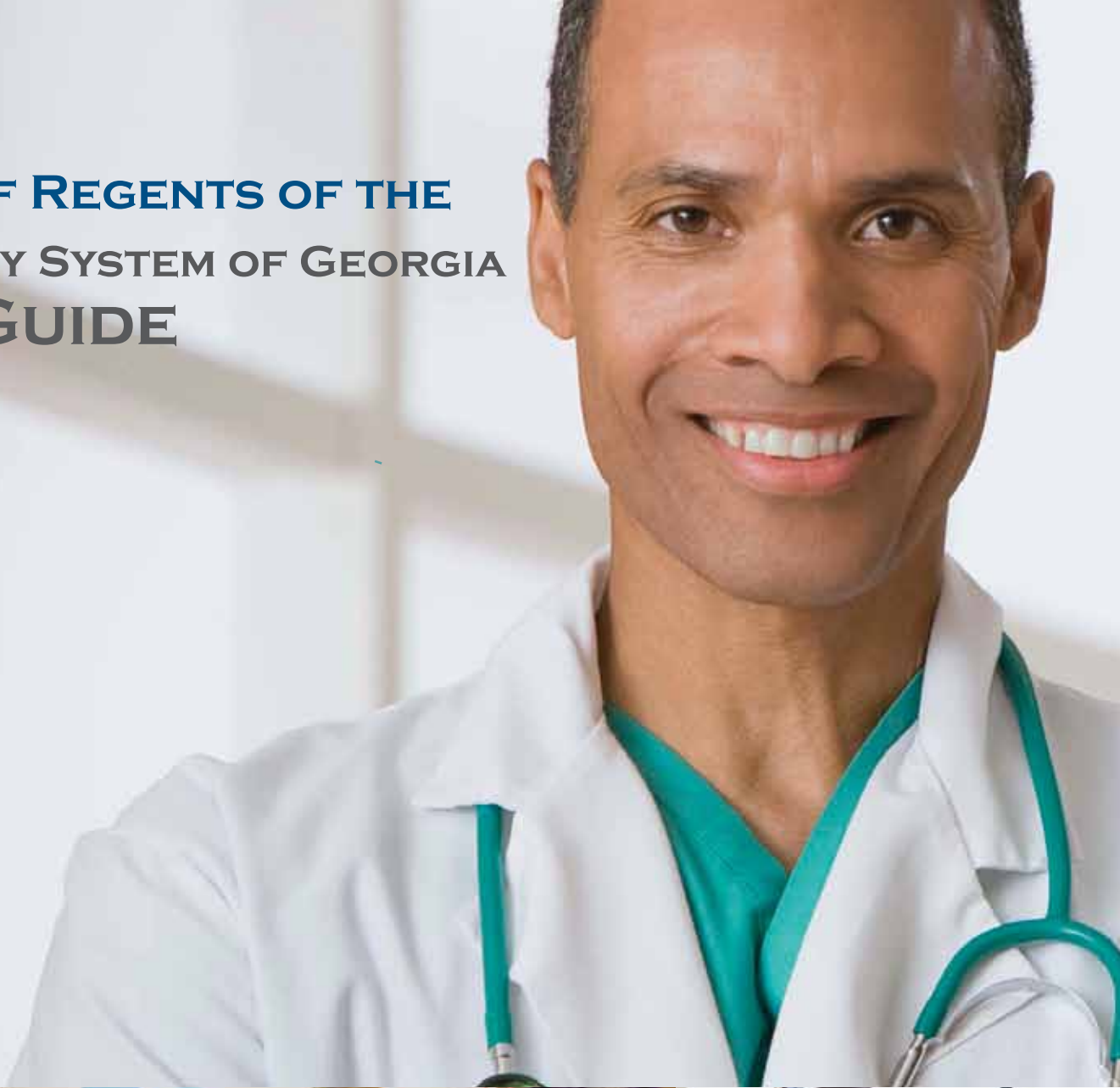


# 2011

## BOARD OF REGENTS OF THE UNIVERSITY SYSTEM OF GEORGIA RATE GUIDE



*"Creating A More Educated Georgia"*





*"Creating A More Educated Georgia"*



## Premium Rate Guide

Choosing a health care plan is a personal, individual decision. Because of this, the Board of Regents offers a wide variety of plans for different families and individuals with different health concerns.

### Plans Available to You

Premium rates for the following plans are outlined in this booklet:

- Preferred Provider Organization (PPO)
- Preferred Provider Organization (PPO): Alternative Network
- BlueChoice HMO
- Kaiser Permanente HMO
- HSA PPO High Deductible Health Plan
- HSA PPO High Deductible Health Plan: Alternative Network
- Indemnity Dental

A consumer choice option (CCO) rate is also included for each of the above plans.

### Tobacco Surcharge

A tobacco surcharge of \$50 will be added to your monthly premium if you use tobacco products. The \$50 Tobacco Surcharge applies to any tobacco use.

If you have questions about the plans and premiums, or need assistance, please contact your campus Human Resources office.

If you have additional needs please contact your provider for more information



**Preferred Provider Organization (PPO) Healthcare Plan Premiums  
Active Employee Rates**

	PPO Premium	PPO/CCO Premium	PPO Premium	PPO/CCO Premium
	2010	2010	2011	2011
<b>Employee Only</b>				
Employee	\$ 151.94	\$ 202.61	\$ 166.68	\$ 222.26
Employer	\$ 354.52	\$ 354.52	\$ 388.92	\$ 388.92
<b>Total Rate</b>	<b>\$ 506.46</b>	<b>\$ 557.13</b>	<b>\$ 555.60</b>	<b>\$ 611.18</b>
<b>Employee + Child</b>				
Employee	\$ 273.48	\$ 364.70	\$ 300.02	\$ 400.08
Employer	\$ 638.13	\$ 638.13	\$ 700.02	\$ 700.02
<b>Total Rate</b>	<b>\$ 911.61</b>	<b>\$1,002.83</b>	<b>\$1,000.04</b>	<b>\$1,100.10</b>
<b>Employee + Spouse</b>				
Employee	\$ 319.07	\$ 425.45	\$ 350.02	\$ 466.72
Employer	\$ 744.50	\$ 744.50	\$ 816.72	\$ 816.72
<b>Total Rate</b>	<b>\$1,063.57</b>	<b>\$1,169.95</b>	<b>\$1,166.74</b>	<b>\$1,283.44</b>
<b>Family</b>				
Employee	\$ 440.60	\$ 587.47	\$ 483.34	\$ 644.46
Employer	\$1,028.06	\$1,028.06	\$1,127.78	\$1,127.78
<b>Total Rate</b>	<b>\$1,468.66</b>	<b>\$1,615.53</b>	<b>\$1,611.12</b>	<b>\$1,772.24</b>

A tobacco surcharge of \$50 will be added to your monthly premium if you use tobacco products. The \$50 Tobacco Surcharge applies to any tobacco use.

**Preferred Provider Organization (PPO)  
Alternative Network Healthcare Plan Premiums  
Active Employee Rates**

	<b>PPO Premium</b>	<b>PPO/CCO Premium</b>
	<b>2011</b>	<b>2011</b>
<b>Employee Only</b>		
Employee	\$ 151.94	\$ 202.60
Employer	\$ 354.52	\$ 354.52
<b>Total Rate</b>	<b>\$ 506.46</b>	<b>\$ 557.12</b>
<b>Employee + Child</b>		
Employee	\$ 273.48	\$ 364.70
Employer	\$ 638.14	\$ 638.14
<b>Total Rate</b>	<b>\$ 911.62</b>	<b>\$1,002.84</b>
<b>Employee + Spouse</b>		
Employee	\$ 319.06	\$ 425.44
Employer	\$ 744.50	\$ 744.50
<b>Total Rate</b>	<b>\$1,063.56</b>	<b>\$1,169.94</b>
<b>Family</b>		
Employee	\$ 440.60	\$ 587.46
Employer	\$1,028.06	\$1,028.06
<b>Total Rate</b>	<b>\$1,468.66</b>	<b>\$1,615.52</b>

A tobacco surcharge of \$50 will be added to your monthly premium if you use tobacco products. The \$50 Tobacco Surcharge applies to any tobacco use.



Preferred Provider Organization (PPO) Retiree Healthcare Plan Premiums

	PPO Premium 2010		PPO Premium 2011		
	Enrolled	Not Enrolled	Enrolled	Not Enrolled	One Enrolled
<b>Retiree (Medicare Eligible)</b>					
Employee	\$ 85.79	\$ 185.79	\$ 94.12	\$194.12	
Employer	\$ 200.17	\$ 433.51	\$219.58	\$452.96	
<b>Total Rates</b>	\$ 285.96	\$ 619.30	\$313.70	\$647.08	
<b>Retiree (Medicare Eligible) w/Child</b>					
Employee	\$ 207.33	\$ 307.33	\$ 227.44	\$ 327.44	
Employer	\$ 483.78	\$ 717.11	\$ 530.72	\$ 764.04	
<b>Total Rates</b>	\$ 691.11	\$1,024.44	\$ 758.16	\$1,091.48	
<b>Retiree w/Spouse (both Medicare Eligible)</b>					
Employee	\$ 171.57	\$ 371.57	\$ 188.20	\$ 388.20	\$ 288.20
Employer	\$ 400.32	\$ 867.00	\$ 439.16	\$ 905.80	\$ 672.48
<b>Total Rates</b>	\$ 571.89	\$1,238.57	\$ 627.36	\$1,294.00	\$ 960.68
<b>Retiree (Non-Medicare Eligible) w/Medicare Eligible Spouse</b>					
Employee	\$ 237.72	\$ 337.72	\$ 260.78	\$ 360.78	
Employer	\$ 554.67	\$ 788.01	\$ 608.48	\$ 841.82	
<b>Total Rates</b>	\$ 792.39	\$1,125.72	\$ 869.26	\$1,202.60	
<b>Retiree (Medicare Eligible) w/ Non-Medicare Eligible Spouse</b>					
Employee	\$ 252.92	\$ 352.92	\$ 277.46	\$ 377.46	
Employer	\$ 590.15	\$ 823.48	\$ 647.40	\$ 880.74	
<b>Total Rates</b>	\$ 843.07	\$1,176.40	\$ 924.86	\$1,258.20	
<b>Retiree w/Spouse (Both Medicare Eligible) w/ Family</b>					
Employee	\$ 292.96	\$ 492.96	\$ 321.38	\$ 521.38	\$ 421.38
Employer	\$ 684.02	\$1,150.23	\$ 750.38	\$1,216.56	\$ 983.22
<b>Total Rates</b>	\$ 976.98	\$1,643.19	\$1,071.76	\$1,737.94	\$1,404.60
<b>Retiree (Non-Medicare Eligible) w/Medicare Eligible Spouse &amp; Family</b>					
Employee	\$ 367.57	\$ 467.57	\$ 403.24	\$ 503.24	
Employer	\$ 857.66	\$1,090.99	\$ 940.84	\$1,174.24	
<b>Total Rates</b>	\$1,225.23	\$1,558.56	\$1,344.08	\$1,677.48	
<b>Retiree (Medicare Eligible) w/ Non-Medicare Eligible Spouse &amp; Family</b>					
Employee	\$ 374.24	\$ 474.24	\$ 410.56	\$ 510.56	
Employer	\$ 873.24	\$1,106.57	\$ 957.94	\$1,191.32	
<b>Total Rates</b>	\$1,247.48	\$1,580.81	\$1,368.50	\$1,701.88	

## Preferred Provider Organization (PPO) Retiree Healthcare Plan Premiums

	PPO/CCO Premium 2010		PPO/CCO Premium 2011		
	Enrolled	Not Enrolled	Enrolled	Not Enrolled	One Enrolled
<b>Retiree (Medicare Eligible)</b>					
Employee	\$ 114.39	\$ 247.72	\$ 125.48	\$ 294.36	
Employer	\$ 200.17	\$ 433.51	\$ 219.58	\$ 452.96	
<b>Total Rates</b>	<b>\$ 314.56</b>	<b>\$ 681.23</b>	<b>\$ 345.06</b>	<b>\$ 747.32</b>	
<b>Retiree (Medicare Eligible) w/Child</b>					
Employee	\$ 276.44	\$ 409.78	\$ 303.24	\$ 472.16	
Employer	\$ 483.78	\$ 717.11	\$ 530.72	\$ 764.04	
<b>Total Rates</b>	<b>\$ 760.22</b>	<b>\$1,126.89</b>	<b>\$ 833.96</b>	<b>\$1,236.20</b>	
<b>Retiree w/Spouse (both Medicare Eligible)</b>					
Employee	\$ 228.76	\$ 495.42	\$ 250.94	\$ 588.78	\$ 419.86
Employer	\$ 400.32	\$ 867.00	\$ 439.16	\$ 905.80	\$ 672.48
<b>Total Rates</b>	<b>\$ 629.08</b>	<b>\$1,362.42</b>	<b>\$ 690.10</b>	<b>\$1,494.58</b>	<b>\$1,092.34</b>
<b>Retiree (Non-Medicare Eligible) w/Medicare Eligible Spouse</b>					
Employee	\$ 316.96	\$ 450.29	\$ 347.70	\$ 516.60	
Employer	\$ 554.67	\$ 788.01	\$ 608.48	\$ 841.82	
<b>Total Rates</b>	<b>\$ 871.63</b>	<b>\$1,238.30</b>	<b>\$ 956.18</b>	<b>\$1,358.42</b>	
<b>Retiree (Medicare Eligible) w/ Non-Medicare Eligible Spouse</b>					
Employee	\$ 337.23	\$ 470.56	\$ 369.94	\$ 538.82	
Employer	\$ 590.15	\$ 823.48	\$ 647.40	\$ 880.74	
<b>Total Rates</b>	<b>\$ 927.38</b>	<b>\$1,294.04</b>	<b>\$1,017.34</b>	<b>\$1,419.56</b>	
<b>Retiree w/Spouse (Both Medicare Eligible) w/ Family</b>					
Employee	\$ 390.66	\$ 657.27	\$ 428.54	\$ 766.28	\$ 597.40
Employer	\$ 684.02	\$1,150.23	\$ 750.38	\$1,216.56	\$ 983.22
<b>Total Rates</b>	<b>\$1,074.68</b>	<b>\$1,807.50</b>	<b>\$1,178.92</b>	<b>\$1,982.84</b>	<b>\$1,580.62</b>
<b>Retiree (Non-Medicare Eligible) w/Medicare Eligible Spouse &amp; Family</b>					
Employee	\$ 490.09	\$ 623.43	\$ 537.64	\$ 706.48	
Employer	\$ 857.66	\$1,090.99	\$ 940.84	\$1,174.24	
<b>Total Rates</b>	<b>\$1,347.75</b>	<b>\$1,714.42</b>	<b>\$1,478.48</b>	<b>\$1,880.72</b>	
<b>Retiree (Medicare Eligible) w/ Non-Medicare Eligible Spouse &amp; Family</b>					
Employee	\$ 498.99	\$ 632.32	\$ 547.40	\$ 716.24	
Employer	\$ 873.24	\$1,106.57	\$ 957.94	\$1,191.32	
<b>Total Rates</b>	<b>\$1,372.23</b>	<b>\$1,738.89</b>	<b>\$1,505.34</b>	<b>\$1,907.56</b>	

A tobacco surcharge of \$50 will be added to your monthly premium if you use tobacco products. The \$50 Tobacco Surcharge applies to any tobacco use.

Note: Retirees who are not eligible for Medicare will be paying the "Active" rates. Retirees and spouses reaching 65 have option to enroll in Medicare B or pay full cost of insurance.

**Preferred Provider Organization (PPO)  
Alternative Network  
Retiree Healthcare Plan Premiums**

	PPO Premium 2011			PPO/CCO Premium 2011		
	Enrolled	Not Enrolled	One Enrolled	Enrolled	Not Enrolled	One Enrolled
<b>Retiree (Medicare Eligible)</b>						
Employee	\$ 85.78	\$ 185.78		\$ 114.38	\$ 247.72	
Employer	\$ 200.18	\$ 433.52		\$ 200.18	\$ 433.52	
<b>Total Rates</b>	<b>\$ 285.96</b>	<b>\$ 619.30</b>		<b>\$ 314.56</b>	<b>\$ 681.24</b>	
<b>Retiree (Medicare Eligible) w/Child</b>						
Employee	\$ 207.32	\$ 307.36		\$ 276.44	\$ 409.78	
Employer	\$ 483.78	\$ 717.08		\$ 483.78	\$ 717.08	
<b>Total Rates</b>	<b>\$ 691.10</b>	<b>\$1,024.44</b>		<b>\$ 760.22</b>	<b>\$1,126.86</b>	
<b>Retiree w/Spouse (both Medicare Eligible)</b>						
Employee	\$ 171.56	\$ 371.56	\$ 271.56	\$ 228.76	\$ 495.42	\$ 362.08
Employer	\$ 400.32	\$ 867.00	\$ 633.66	\$ 400.32	\$ 867.00	\$ 633.66
<b>Total Rates</b>	<b>\$ 571.88</b>	<b>\$1,238.56</b>	<b>\$ 905.22</b>	<b>\$ 629.08</b>	<b>\$1,362.42</b>	<b>\$ 995.74</b>
<b>Retiree (Non-Medicare Eligible) w/Medicare Eligible Spouse</b>						
Employee	\$ 237.72	\$ 337.72		\$ 316.96	\$ 450.30	
Employer	\$ 554.68	\$ 788.00		\$ 554.68	\$ 788.00	
<b>Total Rates</b>	<b>\$ 792.40</b>	<b>\$1,125.72</b>		<b>\$ 871.64</b>	<b>\$1,238.30</b>	
<b>Retiree (Medicare Eligible) w/ Non-Medicare Eligible Spouse</b>						
Employee	\$ 252.92	\$ 352.92		\$ 337.24	\$ 470.56	
Employer	\$ 590.14	\$ 823.48		\$ 590.14	\$ 823.48	
<b>Total Rates</b>	<b>\$ 843.06</b>	<b>\$1,176.40</b>		<b>\$ 927.38</b>	<b>\$1,294.04</b>	

A tobacco surcharge of \$50 will be added to your monthly premium if you use tobacco products. The \$50 Tobacco Surcharge applies to any tobacco use.

Note: Retirees who are not eligible for Medicare will be paying the "Active" rates. Retirees and spouses reaching 65 have option to enroll in Medicare B or pay full cost of insurance.

## Preferred Provider Organization (PPO)

## Alternative Network

Retiree Healthcare Plan Premiums *continued*

	PPO Premium 2011			PPO/CCO Premium 2011		
	Enrolled	Not Enrolled	One Enrolled	Enrolled	Not Enrolled	One Enrolled
<b>Retiree w/Spouse (Both Medicare Eligible) w/ Family</b>						
Employee	\$ 292.96	\$ 492.96	\$ 392.96	\$ 390.66	\$ 657.28	\$ 523.96
Employer	\$ 684.02	\$1,150.24	\$ 916.90	\$ 684.02	\$1,150.24	\$ 916.90
<b>Total Rates</b>	\$ 976.98	\$1,643.20	\$1,309.86	\$1,074.68	\$1,807.52	\$1,440.86
<b>Retiree (Non-Medicare Eligible) w/Medicare Eligible Spouse &amp; Family</b>						
Employee	\$ 367.56	\$ 467.56		\$ 490.08	\$ 623.42	
Employer	\$ 857.66	\$1,091.00		\$ 857.66	\$1,091.00	
<b>Total Rates</b>	\$1,225.22	\$1,558.56		\$1,347.74	\$1,714.42	
<b>Retiree (Medicare Eligible) w/ Non-Medicare Eligible Spouse &amp; Family</b>						
Employee	\$ 374.24	\$ 474.24		\$ 499.00	\$ 632.32	
Employer	\$ 873.24	\$1,106.56		\$ 873.24	\$1,106.56	
<b>Total Rates</b>	\$1,247.48	\$1,580.80		\$1,372.24	\$1,738.88	

A tobacco surcharge of \$50 will be added to your monthly premium if you use tobacco products. The \$50 Tobacco Surcharge applies to any tobacco use.

**Note:** Retirees who are not eligible for Medicare will be paying the "Active" rates. Retirees and spouses reaching 65 have option to enroll in Medicare B or pay full cost of insurance.

## BlueChoice HMO

### Healthcare Plan Premiums

	BlueChoice HMO Premium	Blue Choice HMO/ CCO Premium	BlueChoice HMO Premium	Blue Choice HMO/ CCO Premium
	2010	2010	2011	2011
<b>Employee Only</b>				
Employee	\$ 113.00	\$ 178.91	\$ 123.96	\$ 196.26
Employer	\$ 263.65	\$ 263.65	\$ 289.24	\$ 289.24
<b>Total Rate</b>	<b>\$ 376.65</b>	<b>\$ 442.56</b>	<b>\$ 413.20</b>	<b>\$ 485.50</b>
<b>Employee + Child</b>				
Employee	\$ 203.40	\$ 322.05	\$ 223.14	\$ 353.28
Employer	\$ 474.59	\$ 474.59	\$ 520.62	\$ 520.62
<b>Total Rate</b>	<b>\$ 677.99</b>	<b>\$ 796.64</b>	<b>\$ 743.76</b>	<b>\$ 873.90</b>
<b>Employee + Spouse</b>				
Employee	\$ 237.30	\$ 375.73	\$ 260.32	\$ 412.18
Employer	\$ 553.69	\$ 553.69	\$ 607.40	\$ 607.40
<b>Total Rate</b>	<b>\$ 790.99</b>	<b>\$ 929.42</b>	<b>\$ 867.72</b>	<b>\$1,019.58</b>
<b>Family</b>				
Employee	\$ 327.70	\$ 518.86	\$ 359.50	\$ 569.20
Employer	\$ 764.63	\$ 764.63	\$ 838.80	\$ 838.80
<b>Total Rate</b>	<b>\$1,092.33</b>	<b>\$1,283.49</b>	<b>\$1,198.30</b>	<b>\$1,408.00</b>

A tobacco surcharge of \$50 will be added to your monthly premium if you use tobacco products. The \$50 Tobacco Surcharge applies to any tobacco use.



**Kaiser Permanente HMO  
Healthcare Plan Premiums  
Active Employee Rates**

	<b>Kaiser HMO Premium</b>	<b>Kaiser HMO/CCO Premium</b>	<b>Kaiser HMO Premium</b>	<b>Kaiser HMO/CCO Premium</b>
	<b>2010</b>	<b>2010</b>	<b>2011</b>	<b>2011</b>
<b>Employee Only</b>				
Employee	\$ 113.00	\$ 178.91	\$ 122.36	\$ 193.82
Employer	\$ 263.68	\$ 263.68	\$ 285.50	\$ 285.50
<b>Total Rates</b>	<b>\$ 376.68</b>	<b>\$ 442.59</b>	<b>\$ 407.86</b>	<b>\$ 479.32</b>
<b>Employee + Child</b>				
Employee	\$ 203.41	\$ 322.05	\$ 220.24	\$ 348.88
Employer	\$ 474.61	\$ 474.61	\$ 513.90	\$ 513.90
<b>Total Rates</b>	<b>\$ 678.02</b>	<b>\$ 796.66</b>	<b>\$ 734.14</b>	<b>\$ 862.78</b>
<b>Employee + Spouse</b>				
Employee	\$ 237.32	\$ 375.74	\$ 256.96	\$ 407.06
Employer	\$ 553.74	\$ 553.74	\$ 599.56	\$ 599.56
<b>Total Rates</b>	<b>\$ 791.06</b>	<b>\$ 929.48</b>	<b>\$ 856.52</b>	<b>\$1,006.62</b>
<b>Family</b>				
Employee	\$ 327.71	\$ 518.85	\$ 354.84	\$ 562.14
Employer	\$ 764.67	\$ 764.67	\$ 827.92	\$ 827.92
<b>Total Rates</b>	<b>\$1,092.38</b>	<b>\$1,283.52</b>	<b>\$1,182.76</b>	<b>\$1,390.06</b>

A tobacco surcharge of \$50 will be added to your monthly premium if you use tobacco products. The \$50 Tobacco Surcharge applies to any tobacco use.

## Kaiser Permanente HMO

### Retiree Healthcare Plan Premiums

	Kaiser HMO Premium	Kaiser HMO Premium
	2010	2011
<b>Retiree w/Medicare*</b>		
Employee	\$ 99.14	\$ 107.38
Employer	\$ 231.34	\$ 250.54
<b>Total Rates</b>	<b>\$ 330.48</b>	<b>\$ 357.92</b>
<b>Retiree w/Spouse, Both w/Medicare*</b>		
Employee	\$ 198.29	\$ 214.76
Employer	\$ 462.67	\$ 501.06
<b>Total Rates</b>	<b>\$ 660.96</b>	<b>\$ 715.82</b>
<b>Retiree w/Child w/Medicare</b>		
Employee	\$ 212.15	\$ 229.74
Employer	\$ 495.01	\$ 536.04
<b>Total Rates</b>	<b>\$ 707.16</b>	<b>\$ 765.78</b>
<b>Retiree w/Spouse, One w/Medicare</b>		
Employee	\$ 212.15	\$ 229.74
Employer	\$ 495.01	\$ 536.04
<b>Total Rates</b>	<b>\$ 707.16</b>	<b>\$ 765.78</b>
<b>Retiree w/Spouse &amp; Family, One w/Medicare</b>		
Employee	\$ 319.51	\$ 345.96
Employer	\$ 745.51	\$ 807.28
<b>Total Rates</b>	<b>\$1,065.02</b>	<b>\$1,153.24</b>
<b>Retiree w/Spouse &amp; Family, Both w/Medicare</b>		
Employee	\$ 311.29	\$ 337.12
Employer	\$ 726.35	\$ 786.58
<b>Total Rates</b>	<b>\$1,037.64</b>	<b>\$1,123.70</b>



A tobacco surcharge of \$50 will be added to your monthly premium if you use tobacco products. The \$50 Tobacco Surcharge applies to any tobacco use.

## High Deductible/Health Savings Account

## HDHP (HSA-qualified) PPO Healthcare Plan Premiums

	HDHP/HSA Premium	HDHP/HSA CCO Premium	HDHP/HSA Premium	HDHP/HSA CCO Premium
	2010	2010	2011	2011
<b>Employee Only</b>				
Employee	\$ 25.25	\$ 50.50	\$ 27.70	\$ 55.40
Employer	\$227.24	\$227.24	\$249.28	\$249.28
Total Rate	\$252.49	\$277.74	\$276.98	\$304.68
<b>Employee + Child</b>				
Employee	\$ 44.12	\$ 88.24	\$ 48.40	\$ 96.82
Employer	\$397.09	\$397.09	\$435.60	\$435.60
Total Rate	\$441.21	\$485.33	\$484.00	\$532.42
<b>Employee + Spouse</b>				
Employee	\$ 51.20	\$102.40	\$ 56.16	\$112.34
Employer	\$460.80	\$460.80	\$505.50	\$505.50
Total Rate	\$512.00	\$563.20	\$561.66	\$617.84
<b>Family</b>				
Employee	\$ 70.07	\$140.14	\$ 76.88	\$153.74
Employer	\$630.63	\$630.63	\$691.80	\$691.80
Total Rate	\$700.70	\$770.77	\$768.68	\$845.54
<b>Retiree w/Medicare</b>				
Employee	\$ 25.25	\$ 50.50	\$ 27.70	\$ 55.40
Employer	\$227.24	\$227.24	\$249.28	\$249.28
Total Rate	\$252.49	\$277.74	\$276.98	\$304.68
<b>Retiree + One (both w/Medicare)</b>				
Employee	\$ 51.20	\$102.40	\$ 56.16	\$112.34
Employer	\$460.80	\$460.80	\$505.50	\$505.50
Total Rate	\$512.00	\$563.20	\$561.66	\$617.84

A tobacco surcharge of \$50 will be added to your monthly premium if you use tobacco products. The \$50 Tobacco Surcharge applies to any tobacco use.

Note: Retirees who are not eligible for Medicare will be paying the "Active" rates. Retirees and spouses reaching 65 have option to enroll in Medicare B or pay full cost of insurance.

## High Deductible/Health Savings Account

### HDHP (HSA-qualified) PPO Alternative Network Healthcare Plan Premiums

	HDHP/HSA Premium	HDHP/HSA CCO Premium
	2011	2011
<b>Employee Only</b>		
Employee	\$ 25.24	\$ 50.50
Employer	\$227.24	\$227.24
<b>Total Rate</b>	<b>\$252.48</b>	<b>\$277.74</b>
<b>Employee + Child</b>		
Employee	\$ 44.12	\$ 88.24
Employer	\$397.10	\$397.10
<b>Total Rate</b>	<b>\$441.22</b>	<b>\$485.34</b>
<b>Employee + Spouse</b>		
Employee	\$ 51.20	\$102.40
Employer	\$460.80	\$460.80
<b>Total Rate</b>	<b>\$512.00</b>	<b>\$563.20</b>
<b>Family</b>		
Employee	\$ 70.06	\$140.14
Employer	\$630.64	\$630.64
<b>Total Rate</b>	<b>\$700.70</b>	<b>\$770.78</b>
<b>Retiree w/Medicare</b>		
Employee	\$ 25.24	\$ 50.50
Employer	\$227.24	\$227.24
<b>Total Rate</b>	<b>\$252.48</b>	<b>\$277.74</b>
<b>Retiree + One (both w/Medicare)</b>		
Employee	\$ 51.20	\$102.40
Employer	\$460.80	\$460.80
<b>Total Rate</b>	<b>\$512.00</b>	<b>\$563.20</b>

A tobacco surcharge of \$50 will be added to your monthly premium if you use tobacco products. The \$50 Tobacco Surcharge applies to any tobacco use.

## Indemnity Dental Plan Premiums “Employee–Pay–All” Program

	Indemnity Dental Premium	Indemnity Dental Premium
	2010	2011
<b>Employee Only</b>	\$28.33	\$30.84
<b>Employee + Child</b>	\$53.81	\$58.58
<b>Employee + Spouse</b>	\$56.64	\$61.66
<b>Family</b>	\$90.63	\$98.66





*"Creating A More Educated Georgia"*