

2015 Health Insurance Monthly Premiums

SPOC-covered Employees



Premiums with the \$62 per month Wellness Reduction

Alliance Select Coverage	Total Monthly Premium	State Share	% Premium	EE Share	% Premium
Employee only	\$386.70	\$368.96	95%	\$17.74	5%
Employee and Child(ren)	\$732.02	\$643.06	88%	\$88.96	12%
Employee and Spouse	\$791.96	\$690.62	87%	\$101.34	13%
Employee, Spouse, and Child(ren)	\$1,186.78	\$1,004.00	85%	\$182.78	15%
Double Spouse Contract Holder	\$593.39	\$533.01	90%	\$60.38	10%
Double Spouse Contributing Spouse	\$593.39	\$471.01	79%	\$122.38	21%

Premiums without the \$62 per month Wellness Reduction

Alliance Select Coverage	Total Monthly Premium	State Share	% Premium	EE Share	% Premium
Employee only	\$386.70	\$306.96	80%	\$79.74	20%
Employee and Child(ren)	\$732.02	\$581.06	80%	\$150.96	20%
Employee and Spouse	\$791.96	\$628.62	80%	\$163.34	20%
Employee, Spouse, and Child(ren)	\$1,186.78	\$942.00	80%	\$244.78	20%
Double Spouse Contract Holder	\$593.39	\$471.01	80%	\$122.38	20%
Double Spouse Contributing Spouse	\$593.39	\$471.01	80%	\$122.38	20%