

Group #120156

BlueCross BlueShield Medical Premiums

For 2018

Effective April 1, 2018 through December 31, 2018

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Medical - Buy-Up Option 1					
Monthly			Bi-Weekly		
Tier	Premium	Employer	Tier	Premium	Employer
Employee only -	\$200.00	\$325.00	Employee only -	\$92.31	\$150.00
❖ Family -	\$627.00	\$672.00	* Family -	\$289.38	\$310.15
Medical - Core Option 2					
Monthly			Bi-Weekly		
Tier	Premium	Employer	Tier	Premium	Employer
❖ Employee only -	\$119.00	\$300.00	Employee only -	\$54.92	\$138.46
Samily -	\$420.00	\$672.00	* Family -	\$193.85	\$310.15
**NEW PLAN Medical - HDHP Option 3 (High Deductible Health Plan)					
Monthly			Bi-Weekly		
Tier	Premium	Employer	Tier	Premium	Employer
Employee only -	\$95.93	\$156.96	❖ Employee only -	\$44.28	\$72.44
* Family -	\$216.30	\$327.47	❖ Family -	\$99.83	\$151.14