

TANGIPAHOA PARISH SCHOOL SYSTEM


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MARK KOLWE
Superintendent

DANNY RIDGEL
President of the Board

March 19, 2009

TO: Principals & Supervisors

FROM: Ron Caruso
Chief Financial Officer 

SUBJECT: 2009 State Group Benefit Insurance Rates

Attached you will find the new rates for various plans offered by State Group Benefits. These rates will go into effect July 1, 2009.

Please make available the new rate schedule to all your faculty and/or staff.

Open enrollment will be the month of April. Changes may be made during this time and will be effective July 1, 2009. State Group Benefits representatives will provide a presentation and be available to answer any questions on April 2, 2009 at 5:00 p.m. at the Hammond High School cafeteria.

/vyb

Attachment

c: Superintendent Mark Kolwe
Thomas Bellavia
Melissa Stilley
Rosa Dupuy

**OFFICE OF GROUP BENEFITS
OFFICIAL SCHEDULE OF RATES
EFFECTIVE JULY 1, 2009**



**STATEWIDE
PRO RATES
JULY 1, 2009**

**STATEWIDE
EPO RATES
JULY 1, 2009**

**STATEWIDE
HMO RATES
JULY 1, 2009**

	STATEWIDE PRO RATES JULY 1, 2009			STATEWIDE EPO RATES JULY 1, 2009			STATEWIDE HMO RATES JULY 1, 2009		
	STATE SHARE	EMP SHARE	TOTAL	STATE SHARE	EMP SHARE	TOTAL	STATE SHARE	EMP SHARE	TOTAL
ACTIVE									
SINGLE	418.98	139.66	558.64	418.98	162.06	581.04	402.28	134.08	536.36
WITH SPOUSE	732.94	453.62	1186.56	732.94	501.10	1234.04	703.66	433.46	1139.12
WITH CHILDREN	480.32	201.00	681.32	480.32	228.28	708.60	461.16	192.96	654.12
FAMILY	765.36	486.04	1251.40	765.36	536.08	1301.44	734.78	466.58	1201.36

RETIRED NO MEDICARE & RE-EMPLOYED RETIREE

SINGLE	899.62	139.66	1039.28	899.62	181.18	1080.80	863.64	134.08	997.72
WITH SPOUSE	1381.58	453.62	1835.20	1381.58	526.98	1908.56	1326.26	433.46	1761.72
WITH CHILDREN	956.64	201.00	1157.64	956.64	247.28	1203.92	918.44	192.96	1111.40
FAMILY	1369.74	456.58	1826.32	1369.74	529.62	1899.36	1314.96	438.32	1753.28

RETIRED WITH 1 MEDICARE

SINGLE	253.48	84.48	337.96	253.48	98.00	351.48	243.34	81.10	324.44
WITH SPOUSE	936.54	312.18	1248.72	936.54	362.10	1298.64	899.02	299.66	1198.68
WITH CHILDREN	438.72	146.24	584.96	438.72	169.64	608.36	421.20	140.40	561.60
FAMILY	1247.86	413.94	1663.80	1247.86	482.46	1730.32	1197.90	399.30	1597.20

RETIRED WITH 2 MEDICARE

WITH SPOUSE	455.62	151.86	607.48	455.62	176.10	631.72	437.38	145.78	583.16
FAMILY	564.12	188.04	752.16	564.12	218.12	782.24	541.56	180.52	722.08

COBRA

SINGLE	0.00	569.82	569.82	0.00	592.66	592.66	0.00	547.06	547.06
WITH SPOUSE	0.00	1210.30	1210.30	0.00	1258.70	1258.70	0.00	1161.88	1161.88
WITH CHILDREN	0.00	694.96	694.96	0.00	722.78	722.78	0.00	667.16	667.16
FAMILY	0.00	1276.44	1276.44	0.00	1327.42	1327.42	0.00	1225.38	1225.38

DISABILITY COBRA

SINGLE	0.00	439.96	439.96	0.00	671.34	671.34	0.00	304.52	304.52
WITH SPOUSE	0.00	1779.84	1779.84	0.00	1831.34	1831.34	0.00	1708.66	1708.66
WITH CHILDREN	0.00	1021.96	1021.96	0.00	1062.88	1062.88	0.00	981.14	981.14
FAMILY	0.00	1877.10	1877.10	0.00	1952.14	1952.14	0.00	1802.02	1802.02

NOTE: 1) The breakdown between State Share and Employee Share may not be accurate for certain School Board employees due to local funding affecting contributions. Total premium columns are correct for all agencies.
2) All members that retire on or after July 1, 1987 must have Medicare-Parts A and B in order to qualify for the reduced premium rates.

Approved by: 

3/16/2009