

Monthly Premiums for Former Employees and Surviving Dependents Plan Year Jan. 1 - Dec. 31, 2021



OKLAHOMA
Office of Management
& Enterprise Services

HEALTH PLANS	MEMBER	SPOUSE	CHILD	CHILDREN
Blue Cross Blue Shield of Oklahoma - BlueLincs HMO	\$ 593.50	\$ 876.10	\$ 320.66	\$ 523.60
CommunityCare HMO	\$ 1,067.28	\$ 1,554.62	\$ 543.58	\$ 869.74
GlobalHealth HMO	\$ 799.92	\$ 1,180.78	\$ 456.80	\$ 745.98
HealthChoice High and High Alternative	\$ 615.90	\$ 722.12	\$ 309.80	\$ 525.72
HealthChoice Basic and Basic Alternative	\$ 487.36	\$ 571.96	\$ 251.34	\$ 425.14
HealthChoice High Deductible Health Plan (HDHP)	\$ 422.26	\$ 495.86	\$ 218.10	\$ 368.22

DENTAL PLANS	MEMBER	SPOUSE	CHILD	CHILDREN
BCBSOK - BlueCare Dental High Plan	\$ 38.04	\$ 38.04	\$ 30.80	\$ 78.72
BCBSOK - BlueCare Dental Low Plan	\$ 26.28	\$ 26.28	\$ 22.62	\$ 55.44
Cigna Prepaid High (K1I09)	\$ 12.30	\$ 9.96	\$ 7.64	\$ 13.10
Cigna Prepaid Low (OKIV9)	\$ 9.50	\$ 6.18	\$ 4.20	\$ 9.46
Delta Dental PPO	\$ 38.04	\$ 38.04	\$ 33.10	\$ 83.68
Delta Dental PPO – Choice	\$ 15.68	\$ 35.56	\$ 35.82	\$ 86.96
HealthChoice Dental	\$ 41.72	\$ 41.72	\$ 33.72	\$ 86.50
MetLife High Classic MAC	\$ 48.60	\$ 48.60	\$ 41.64	\$103.10
MetLife Low Classic MAC	\$ 28.00	\$ 28.00	\$ 24.00	\$ 59.00
Sun Life Preferred Active PPO	\$ 36.18	\$ 36.00	\$ 27.00	\$ 72.56

VISION PLANS	MEMBER	SPOUSE	CHILD	CHILDREN
Primary Vision Care Services (PVCS)	\$ 10.40	\$ 9.28	\$ 9.20	\$ 11.50
Superior Vision	\$ 7.62	\$ 7.58	\$ 7.18	\$ 14.74
Vision Care Direct	\$ 15.90	\$ 11.26	\$ 11.26	\$ 22.74
VSP (Vision Service Plan)	\$ 8.72	\$ 5.78	\$ 5.70	\$ 12.48

LIFE PLAN FOR PRE-MEDICARE RETIREES/VESTS							
From \$5,000 to \$40,000		\$ 2.56 Per \$1,000					
AGE RATED SUPPLEMENTAL LIFE — Cost Per \$1,000 for \$41,000 and Up							
< 30 ----	\$ 0.06	30 - 34 ----	\$ 0.06	35 - 39 ----	\$ 0.06	40 - 44 ----	\$ 0.08
45 - 49 ----	\$ 0.14	50 - 54 ----	\$ 0.26	55 - 59 ----	\$ 0.40	60 - 64 ----	\$ 0.46
65 - 69 ----	\$ 0.74	70 - 74 ----	\$ 1.28	75+ ----	\$ 1.96		

DEPENDENT LIFE	\$ 1.28 Per \$500 Unit, Per Dependent
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MONTHLY LIFE INSURANCE PREMIUMS FOR SURVIVING DEPENDENTS			
Surviving Dependents of Current Employees	Low Option \$2.60	Standard Option \$4.32	Premier Option \$9.42
Spouse	\$ 6,000 of coverage	\$ 10,000 of coverage	\$ 20,000 of coverage
Child (live birth to age 26)	\$ 3,000 of coverage	\$ 5,000 of coverage	\$ 10,000 of coverage
Surviving Dependents of Former Employees	\$1.28 Per \$500 Unit, Per Dependent		

Dependent Life does not include Accidental Death and Dismemberment (AD&D).