

**Premera Blue Cross Blue Shield of Alaska  
Group 1011203**

**Prices effective July 1, 2018 to June 30, 2019**

**Monthly Premium\***

<b>FULL TIME EMPLOYEE</b>	<b>CITY</b>	<b>EMPLOYEE</b>	<b>TOTAL</b>
Employee Only	\$ 1,043.87	\$ 115.99	\$ 1,159.86
Employee & Spouse	\$ 1,954.85	\$ 217.21	\$ 2,172.06
Employee and Family	\$ 2,800.49	\$ 311.17	\$ 3,111.66
Employee & Child(ren)	\$ 1,889.58	\$ 209.95	\$ 2,099.53

**Next opportunity to change enrollment will be during the Open Enrollment period in June of every year,  
for a July 1<sup>st</sup> effective date unless there is a life-changing event  
(i.e., marriage, divorce, birth/adoption, other health care coverage dropped, etc.)**

\*Employees working less than 40 hours per week, please call Human Resources at 747-1816 or Lindsey in payroll at 747-1825 to get the prorated rates for coverage.