

Member and Dependent Monthly Contributions

While the State covers most of the cost of employee health coverage, employees must also make a monthly salary-based contribution. The salary-based contributions indicated below will begin July 1, 2011, and remain in effect until June 30, 2012. Employees who retire, accept a voluntary salary reduction or return to State employment at a different salary may have their monthly contribution adjusted based upon the new salary (this applies to employees who return to work after having a 10-day or greater break in State service after terminating employment – this **does not** apply to employees who have a break in coverage due to a leave of absence).

Employee Annual Salary	Employee Monthly Health Plan Contributions*	
\$30,200 & below	Managed Care: \$47.00	Quality Care: \$72.00
\$30,201 - \$45,600	Managed Care: \$52.00	Quality Care: \$77.00
\$45,601 - \$60,700	Managed Care: \$54.50	Quality Care: \$79.50
\$60,701 - \$75,900	Managed Care: \$57.00	Quality Care: \$82.00
\$75,901 & above	Managed Care: \$59.50	Quality Care: \$84.50

Note: Employees who reside in Illinois but do not have access to a managed care plan may be eligible for a lower health plan contribution. Contact the CMS Group Insurance Division, Analysis and Resolution Unit at (800) 442-1300 or (217) 558-4671, for assistance.

Retiree, Annuitant and Survivor Monthly Health Plan Contribution

20 years or more of creditable service	\$0.00
Less than 20 years of creditable service and, <ul style="list-style-type: none"> • SERS/SURS annuitant/survivor on or after 1/1/98, or • TRS annuitant/survivor on or after 7/1/99 	Required to pay a percentage of the cost of the basic coverage.

Call the appropriate retirement system for applicable premiums.

SERS: (217) 785-7444; SURS: (800) 275-7877; TRS: (800) 877-7896

Monthly Optional Term Life Plan Contributions

Member by Age	Monthly Rate Per \$1,000
Under 30	\$0.06
Ages 30 - 34	0.08
Ages 35 - 44	0.10
Ages 45 - 49	0.16
Ages 50 - 54	0.24
Ages 55 - 59	0.44
Ages 60 - 64	0.66
Ages 65 - 69	1.28
Ages 70 - 74	2.06
Ages 75 - 79	2.06
Ages 80 - 84	2.06
Ages 85 - 89	2.06
Ages 90 and above	2.06

AD&D Monthly Rate Per \$1,000

Accidental Death & Dismemberment	0.018
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Spouse Life Monthly Rate

Spouse Life \$10,000 coverage (Employees and Annuitants under age 60)	6.00
Spouse Life \$5,000 coverage (Annuitants age 60 and older)	3.00

Child Life Monthly Rate

Child Life \$10,000 coverage	0.70
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The monthly dependent contribution is **in addition** to the member health plan contribution. Dependents will be enrolled in the same plan as the member. **The Medicare dependent contribution applies only if Medicare is PRIMARY for both Parts A and B.** Members with questions regarding Medicare status may contact the CMS Group Insurance Division, Medicare Coordination of Benefits (COB) Unit at (800) 442-1300 or (217) 782-7007.

Dependent Monthly Health Plan Contributions*

Health Plan Name and Code	One Dependent	Two or more Dependents	One Medicare A and B Primary Dependent	Two or more Medicare A and B Primary Dependents
Blue Advantage (Code: CI)	\$ 80	\$110	\$ 75	\$110
HMO Illinois (Code: BY)	\$ 83	\$116	\$ 79	\$116
PersonalCare OAP (Code: CH)	\$ 92	\$130	\$ 88	\$130
HealthLink OAP (Code: CF)	\$105	\$149	\$102	\$149
Quality Care Health Plan (Code: D3)	\$196	\$226	\$142	\$203

Member Monthly Quality Care Dental Plan (QCDP) Contributions*

Member Only	\$11.00
Member plus 1 Dependent	\$17.00
Member plus 2 or more Dependents	\$19.50

* Part-time employees are required to pay a percentage of the State's portion of the contribution in addition to the member contribution. Special rules apply for non-IRS dependents. See the Benefits website for more information.