

Division of State Group Insurance  
Vision Options  
COBRA Subsidy for those deemed eligible for the subsidy  
January 2009 Rates - Exam Plus (Plan 3004)  
Prepared 4/1/09

COBRA Employee Only \$5.97  
COBRA Employee + Spouse \$11.79  
COBRA Employee + Children \$11.67  
COBRA Family \$18.34

EE coverage is assured once this amount is paid

	EE Contribution		ER Contribution		Total Payment
	Calculation	Amount	Calculation	Amount	
<b>Individual</b>					
1 members elig for subsidy	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
<b>Employee + Spouse</b>					
2 members elig for subsidy	\$11.79 * 35%	\$4.13	\$11.79 * 65%	\$7.66	\$11.79
1 member elig for subsidy, 1 not person 1	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 2	\$5.82 * 100%	\$5.82	\$5.82 * 0%	\$0.00	\$5.82
		\$7.91		\$3.88	\$11.79
<b>Employee + Children</b>					
2 members elig for subsidy	\$11.67 * 35%	\$4.08	\$11.67 * 65%	\$7.59	\$11.67
1 member elig for subsidy, 1 or more not person 1	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 2	\$5.70 * 100%	\$5.70	\$5.70 * 0%	\$0.00	\$5.70
		\$7.79		\$3.88	\$11.67
2 members elig for subsidy, 1 or more not person 1	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 2	\$5.70 * 35%	\$2.00	\$5.70 * 65%	\$3.71	\$5.70
person 3	\$0.00 * 100%	\$0.00	\$0.00 * 0%	\$0.00	\$0.00
		\$4.08		\$7.59	\$11.67
3 or more members elig for subsidy	\$11.67 * 35%	\$4.08	\$11.67 * 65%	\$7.59	\$11.67
<b>Family</b>					
2 members elig for subsidy	\$18.34 * 35%	\$6.42	\$18.34 * 65%	\$11.92	\$18.34
1 member elig for subsidy, 1 or more not person 1	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 2	\$12.37 * 100%	\$12.37	\$12.37 * 0%	\$0.00	\$12.37
		\$14.46		\$3.88	\$18.34
2 members elig for subsidy, 1 or more not person 1	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 2	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 3	\$6.40 * 100%	\$6.40	\$6.40 * 0%	\$0.00	\$6.40
		\$10.58		\$7.76	\$18.34
3 members elig for subsidy, 1 or more not person 1	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 2	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 3	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 4	\$0.43 * 100%	\$0.43	\$0.43 * 0%	\$0.00	\$0.43
		\$6.70		\$11.64	\$18.34
4 members elig for subsidy, 1 or more not person 1	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 2	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 3	\$5.97 * 35%	\$2.09	\$5.97 * 65%	\$3.88	\$5.97
person 4	\$0.43 * 35%	\$0.15	\$0.43 * 65%	\$0.28	\$0.43
person 5	\$0.00 * 100%	\$0.00	\$0.00 * 0%	\$0.00	\$0.00
		\$6.42		\$11.92	\$18.34
4 or more members elig for subsidy	\$18.34 * 35%	\$6.42	\$18.34 * 65%	\$11.92	\$18.34

Division of State Group Insurance  
 Vision Options  
 COBRA Subsidy for those deemed eligible for the subsidy  
 January 2009 Rates - Materials Only (Plan 3006)  
 Prepared 4/1/09

COBRA Employee Only \$4.45  
 COBRA Employee + Spouse \$8.77  
 COBRA Employee + Children \$8.67  
 COBRA Family \$13.65

EE coverage is assured once this amount is paid

	EE Contribution		ER Contribution		Total Payment
	Calculation	Amount	Calculation	Amount	
<b>Individual</b>					
1 members elig for subsidy	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
<b>Employee + Spouse</b>					
2 members elig for subsidy	\$8.77 * 35%	\$3.07	\$8.77 * 65%	\$5.70	\$8.77
1 member elig for subsidy, 1 not person 1	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 2	\$4.32 * 100%	\$4.32	\$4.32 * 0%	\$0.00	\$4.32
		\$5.88		\$2.89	\$8.77
<b>Employee + Children</b>					
2 members elig for subsidy	\$8.67 * 35%	\$3.03	\$8.67 * 65%	\$5.64	\$8.67
1 member elig for subsidy, 1 or more not person 1	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 2	\$4.22 * 100%	\$4.22	\$4.22 * 0%	\$0.00	\$4.22
		\$5.78		\$2.89	\$8.67
2 members elig for subsidy, 1 or more not person 1	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 2	\$4.22 * 35%	\$1.48	\$4.22 * 65%	\$2.74	\$4.22
person 3	\$0.00 * 100%	\$0.00	\$0.00 * 0%	\$0.00	\$0.00
		\$3.03		\$5.64	\$8.67
3 or more members elig for subsidy	\$8.67 * 35%	\$3.03	\$8.67 * 65%	\$5.64	\$8.67
<b>Family</b>					
2 members elig for subsidy	\$13.65 * 35%	\$4.78	\$13.65 * 65%	\$8.87	\$13.65
1 member elig for subsidy, 1 or more not person 1	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 2	\$9.20 * 100%	\$9.20	\$9.20 * 0%	\$0.00	\$9.20
		\$10.76		\$2.89	\$13.65
2 members elig for subsidy, 1 or more not person 1	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 2	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 3	\$4.75 * 100%	\$4.75	\$4.75 * 0%	\$0.00	\$4.75
		\$7.87		\$5.79	\$13.65
3 members elig for subsidy, 1 or more not person 1	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 2	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 3	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 4	\$0.30 * 100%	\$0.30	\$0.30 * 0%	\$0.00	\$0.30
		\$4.97		\$8.68	\$13.65
4 members elig for subsidy, 1 or more not person 1	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 2	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 3	\$4.45 * 35%	\$1.56	\$4.45 * 65%	\$2.89	\$4.45
person 4	\$0.30 * 35%	\$0.11	\$0.30 * 65%	\$0.19	\$0.30
person 5	\$0.00 * 100%	\$0.00	\$0.00 * 0%	\$0.00	\$0.00
		\$4.78		\$8.87	\$13.65
4 or more members elig for subsidy	\$13.65 * 35%	\$4.78	\$13.65 * 65%	\$8.87	\$13.65