



State of Illinois Retiree Health Plan Contribution Rates for FY 2017-2018 (effective 07/01/17)

Monthly Health Plan Contribution for Retirees, Annuitants and Survivors

Open enrollment is typically the month of May with effective date of July 1.

The following charges apply to annuitants and survivors with less than 20 years of service:

Final Years of Service at Retirement*	Member Contribution Percentage	QCHP Coverage		HMO Coverage	
		Medicare Total Rate=\$430.42	Non-Medicare Total Rate=\$1,244.92	Medicare Total Rate=\$512.16	Non-Medicare Total Rate=\$910.52
1	95%	\$ 408.89	\$1,182.67	\$ 486.55	\$ 864.99
2	90%	\$ 387.37	\$1,120.42	\$ 460.94	\$ 819.46
3	85%	\$ 365.85	\$1,058.18	\$ 435.33	\$ 773.94
4	80%	\$ 344.33	\$ 995.93	\$ 409.72	\$ 728.41
5	75%	\$ 322.81	\$ 933.69	\$ 384.12	\$ 682.89
6	70%	\$ 301.29	\$ 871.44	\$ 358.51	\$ 637.36
7	65%	\$ 279.77	\$ 809.19	\$ 332.90	\$ 591.83
8	60%	\$ 258.25	\$ 746.95	\$ 307.29	\$ 546.31
9	55%	\$ 236.73	\$ 684.70	\$ 281.68	\$ 500.78
10	50%	\$ 215.21	\$ 622.46	\$ 256.08	\$ 455.26
11	45%	\$ 193.68	\$ 560.21	\$ 230.47	\$ 409.73
12	40%	\$ 172.16	\$ 497.96	\$ 204.86	\$ 364.20
13	35%	\$ 150.64	\$ 435.72	\$ 179.25	\$ 318.68
14	30%	\$ 129.12	\$ 373.47	\$ 153.64	\$ 273.15
15	25%	\$ 107.60	\$ 311.23	\$ 128.04	\$ 227.63
16	20%	\$ 86.08	\$ 248.98	\$ 102.43	\$ 182.10
17	15%	\$ 64.56	\$ 186.73	\$ 76.82	\$ 136.57
18	10%	\$ 43.04	\$ 124.49	\$ 51.21	\$ 91.05
19	5%	\$ 21.52	\$ 62.24	\$ 25.60	\$ 45.52
20+	0%	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

Includes: Health, prescription, and vision coverage Dental insurance is available at a cost (see other side)

2018 State of Illinois Benefit Choice Options booklet is available at:

www.MyBenefits.illinois.gov

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(OVER for dental, dependent, and life insurance rates)

Dependent Monthly Health Plan Contribution *

The monthly dependent contribution is in addition to the employee health contribution. Dependents must 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	Code	One Dependent	Two or more Dependents	One Medicare A and B Dependent*	Two or more Medicare A and B Dependents
Aetna HMO (formerly Coventry Health Care HMO)	CI	\$111	\$156	\$88	\$130
Aetna OAP (formerly Coventry Health Care OAP)	AS	\$111	\$156	\$88	\$130
Blue Advantage	CI	\$96	\$132	\$75	\$110
Health Alliance HMO	AH	\$113	\$159	\$89	\$133
HealthLink OAP	CF	\$126	\$179	\$102	\$149
HMO Illinois	BY	\$100	\$139	\$79	\$116
Quality Care Health Plan (managed by Aetna)	D3	\$249	\$287	\$142	\$203

Monthly Optional Term Life Insurance Contributions

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 and above	\$ 2.06
Accidental Death & Dismemberment	\$ 0.02
Spouse Life (\$10,000)*	\$ 6.00
Spouse Life (\$5,000)*	\$ 3.00
Dependent Children (\$10,000 coverage)	\$ 0.70

* Spouse life coverage will reduce to \$5,000 when an annuitant turns age 60. However, child life coverage will remain at \$10,000 for both active members and eligible annuitants.

Member Monthly Quality Care Dental Plan (QCDDP) Contributions

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

Member and Dependents

Prescription: Currently no additional contribution
 Vision: Currently no additional contribution

Life Insurance:

Retire Before Age 60
Amount = last Annual Salary (until age 60)
Can Purchase up to 8 times a member's salary
Pay a premium for the optional life insurance
Refer to above chart for rates
Retire After Age 60
Amount = \$5,000 (Free from the State of Illinois)
Can Purchase up to 4 times State-paid amount
Pay a premium for the optional life insurance
Refer to above chart for rates

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