

**January 1, 2015 Premium Rate Change
NYS Health Insurance Program Biweekly Rates**

Administrative Paycheck December 17, 2014 - Employees exempt from Lag Payroll
 Administrative Paycheck December 31, 2014 - Employees subject to Lag Payroll
 Administrative Paycheck January 8, 2015 - Employees subject to Extra Lag Payroll
 Institution Paycheck December 24, 2014 - Employees subject to Lag Payroll
 Institution Paycheck December 11, 2014 - Employees not subject to Lag Payroll

***Medicare : 48.28**

				Schedule I Ratified (Settled Groups) <u>Benefit Programs:</u> A01, A02, A03, A04, A05, A06, A07, A13, A14, A15, A17, A19 A20, A25, A28, A29, A33, A34, A35, A36, A37, A39, A41 A42, A43, A44, A46, A47, A48, A50, A51, A53,A60, A61, A62, A63, A64, A65, L19		
	O	C	M			
	P	O	E	Employee	Employee	Full Share
	T	V	D	<SG-9	SG-10+	<u>LWOP</u>
<u>Empire Plan</u>						
Individual	001	1	0	35.42	47.23	295.20
Medicare	001	1	1	(12.86)	(1.05)	246.92
Family	001	4	0	149.56	178.28	717.95
1 Medicare	001	4	1	101.28	130.00	669.67
2 Medicares	001	4	2	53.00	81.72	621.39

			Schedule II Non-Ratified Group (Unsettled Groups) Benefit Program: A09, A10, A11		
O P T	C O V	M E D	Employee	<u>Full Share</u> LWOP	
Empire Plan					
Individual	001	1	0	29.99	299.87
Medicare	001	1	1	(18.29)	251.59
Family	001	4	0	137.27	728.99
1 Medicare	001	4	1	88.99	680.71
2 Medicares	001	4	2	40.71	632.43

				Schedule III Ratified (DC-37) <u>Benefit Programs:</u> A12, A40		
	O	C	M			
	P	O	E	Employee	Employee	Full Share
	T	V	D	<SG-9	SG-10+	<u>LWOP</u>
<u>Empire Plan</u>						
Individual	001	1	0	39.20	58.56	295.20
Medicare	001	1	1	(9.08)	10.28	246.92
Family	001	4	0	158.55	205.25	717.95
1 Medicare	001	4	1	110.27	156.97	669.67
2 Medicares	001	4	2	61.99	108.69	621.39