

North Carolina Teachers' and State Employees' Comprehensive Major Medical Plan

**Monthly Contribution Rates
Effective October 1, 2003**

	<u>EMPLOYER CONTRIBUTION</u>	<u>EMPLOYEE CONTRIBUTION</u>	<u>TOTAL COST</u>
NON-MEDICARE			
EMPLOYEE ONLY	285.92	0.00	285.92
EMPLOYEE /CHILD(REN)	285.92	178.22	464.14
EMPLOYEE /FAMILY	285.92	427.48	713.40
MEDICARE*			
EMPLOYEE ONLY	217.66	0.00	217.66
EMPLOYEE/CHILD(REN)			
EMPLOYEE ELIGIBLE	217.66	178.22	395.88
CHILD(REN) ELIGIBLE	285.92	135.46	421.38
EMPLOYEE AND CHILD(REN) ELIGIBLE	217.66	135.46	353.12
EMPLOYEE AND FAMILY			
EMPLOYEE ELIGIBLE	217.66	427.48	645.14
DEPENDENT(S) ELIGIBLE	285.92	324.88	610.80
EMPLOYEE AND DEPENDENT(S) ELIGIBLE	217.66	324.88	542.54

* Medicare rates do not apply to active employees and/or their dependents since the employer plan is the primary coverage.

NOTE: If your employment contract is for less than 12 months, contact your HBR or benefits office for monthly rates.