

# Medical

## State Health Benefit Plan Rates

Forsyth County Schools pays \$49.38 for all employees participating in the health insurance program through the State Health Benefit Plan. ***Any premiums in excess of the \$49.38 are listed below and will be deducted from your monthly paycheck.***

| Plan Type                           |          |                     |                   |          |
|-------------------------------------|----------|---------------------|-------------------|----------|
| Anthem BlueCross and BlueShield     | Employee | Employee + Children | Employee + Spouse | Family   |
| HRA Gold                            | \$177.81 | \$366.13            | \$516.51          | \$704.83 |
| HRA Gold with Tobacco Charge        | \$257.81 | \$446.13            | \$596.51          | \$784.83 |
| HRA Silver                          | \$103.79 | \$240.29            | \$361.06          | \$497.56 |
| HRA Silver with Tobacco Charge      | \$183.79 | \$320.29            | \$441.06          | \$577.56 |
| HRA Bronze                          | \$44.78  | \$139.97            | \$237.14          | \$332.33 |
| HRA Bronze with Tobacco Charge      | \$124.78 | \$219.97            | \$317.14          | \$412.33 |
| HMO                                 | \$139.91 | \$301.70            | \$436.92          | \$598.71 |
| HMO with Tobacco Charge             | \$219.91 | \$381.70            | \$516.92          | \$678.71 |
|                                     |          |                     |                   |          |
| United Healthcare                   |          |                     |                   |          |
| HMO                                 | \$183.32 | \$375.49            | \$528.08          | \$720.25 |
| HMO with Tobacco Charge             | \$263.32 | \$455.49            | \$608.08          | \$800.25 |
| High Deductible                     | \$34.38  | \$122.29            | \$215.30          | \$303.21 |
| High Deductible with Tobacco Charge | \$114.38 | \$202.29            | \$295.30          | \$383.21 |
|                                     |          |                     |                   |          |
| Kaiser Permanente                   |          |                     |                   |          |
| HMO (Regional HMO)                  | \$139.91 | \$301.70            | \$436.92          | \$598.71 |
| HMO with Tobacco Charge             | \$219.91 | \$381.70            | \$516.92          | \$678.71 |
|                                     |          |                     |                   |          |
| Tri-Care Supplement                 | \$11.12  | \$70.12             | \$70.12           | \$111.12 |

State Health Benefits  
1-800-610-1863  
[www.dch.georgia.gov/shbp](http://www.dch.georgia.gov/shbp)

Kaiser Permanente  
1-855-512-5997  
[my.kp.org/shbp/](http://my.kp.org/shbp/)

Tri-Care Supplement  
1-866-637-9911  
[www.selmantricareresource.com/ga\\_shbp](http://www.selmantricareresource.com/ga_shbp)

Anthem BlueCross & BlueShield  
1-855-641-4862  
[www.anthem.com/shbp/](http://www.anthem.com/shbp/)

PeachCare for Kids  
1-877-427-3224  
[www.peachcare.org](http://www.peachcare.org)

United Healthcare  
1-888-364-6352  
<http://myuhc.com/shbp>

CVS Caremark  
1-844-345-3241  
<http://info.caremark.com/shbp>

If an employee and spouse are both employed with the Forsyth County School System, please ask about our discounted rates for family coverage. Contact the benefits department.