

Oklahoma Higher Education Employee Insurance Group
ACTIVE EMPLOYEES
MONTHLY PREMIUM RATES FOR CALENDAR YEAR 2010 FOR ACTIVE EMPLOYEES
AND DEPENDENTS

Amounts represent monthly payroll deductions					
	EMPLOYEE COST	SPOUSE ONLY	ONE CHILD ONLY	TWO OR MORE CHILDREN ONLY	SPOUSE AND FAMILY
HEALTH INSURANCE:					
Blue Cross Blue Shield High	0.00	453.48	172.74	345.50	798.98
Blue Cross Blue Shield Basic	0.00	341.62	130.14	260.30	601.92
DENTAL: Optional Benefit					
Dental costs only employee is added to all categories					
Blue Cross Blue Shield	30.14	61.80	42.20	54.26	85.92
VISION: VSP					
	0.00	7.12	6.84	8.12	17.24
THE UNIVERSITY/COLLEGE PAYS UP TO \$431.90 TOWARDS THE EMPLOYEE'S MEDICAL COVERAGE					
NOTE: Rates are subject to change January 1, 2011.					