

## 2017 City-Parish Medical Rates w/Medicare\*

COVERAGE	HMO	POS	HDHP
<b>EMPLOYEE ONLY W/PART B:</b>			
YOU PAY	\$46.42	\$85.52	\$46.42
CITY-PARISH PAYS	\$553.78	\$553.78	\$553.78
MONTHLY RATE	\$600.20	\$639.30	\$600.20
<b>EMP. + SPOUSE 1 W/PART B:</b>			
YOU PAY	\$329.18	\$445.30	\$161.20
CITY-PARISH PAYS	\$947.44	\$947.44	\$947.44
MONTHLY RATE	\$1,276.62	\$1,392.74	\$1,108.64
<b>EMP. + SPOUSE 2 W/PART B**:</b>			
YOU PAY	\$232.78	\$348.90	\$64.80
CITY-PARISH PAYS	\$972.74	\$972.74	\$972.74
MONTHLY RATE	\$1,205.52	\$1,321.64	\$1,037.54
<b>EMP. + CHILD(REN) 1 W/PART B:</b>			
YOU PAY	\$277.80	\$379.98	\$125.84
CITY-PARISH PAYS	\$875.84	\$875.84	\$875.84
MONTHLY RATE	\$1,153.64	\$1,255.82	\$1,001.68
<b>FAMILY 1 W/PART B:</b>			
YOU PAY	\$483.38	\$641.76	\$267.48
CITY-PARISH PAYS	\$1,162.22	\$1,162.22	\$1,162.22
MONTHLY RATE	\$1,645.60	\$1,803.98	\$1,429.70
<b>FAMILY 2 W/PART B:</b>			
YOU PAY	\$386.98	\$545.36	\$171.08
CITY-PARISH PAYS	\$1,195.48	\$1,195.48	\$1,195.48
MONTHLY RATE	\$1,582.46	\$1,740.84	\$1,366.56

\*A credit of up to \$96.40 for the Medicare Part B premium will be given to all members enrolled in Medicare Part B.