

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - I

| Managed Fee-For-Service Plans Plan, option and enrollment code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|---|-----------------|-----|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |
| Alliance | | | | | | | | | | | | |
| | High Self | YQ1 | 149.35 | 149.35 | 65.96 | 83.39 | -3.13 | 323.59 | 323.59 | 142.91 | 180.68 | -6.78 |
| | High Family | YQ2 | 316.64 | 316.64 | 142.27 | 174.37 | -7.33 | 686.05 | 686.05 | 308.25 | 377.80 | -15.88 |
| APWU | | | | | | | | | | | | |
| | High Self | 471 | 85.05 | 103.33 | 65.96 | 37.37 | 15.15 | 184.28 | 223.88 | 142.91 | 80.97 | 32.82 |
| | High Family | 472 | 184.89 | 224.64 | 142.27 | 82.37 | 32.42 | 400.60 | 486.72 | 308.25 | 178.47 | 70.24 |
| Blue Cross and Blue Shield | | | | | | | | | | | | |
| | High Self | 101 | 130.41 | 130.41 | 65.96 | 64.45 | -3.13 | 282.56 | 282.56 | 142.91 | 139.65 | -6.78 |
| | High Family | 102 | 278.86 | 278.86 | 142.27 | 136.59 | -7.33 | 604.20 | 604.20 | 308.25 | 295.95 | -15.88 |
| | Standard Self | 104 | 82.97 | 89.18 | 65.96 | 23.22 | 2.48 | 179.77 | 193.22 | 142.91 | 50.31 | 5.37 |
| | Standard Family | 105 | 184.97 | 198.85 | 142.27 | 56.58 | 6.55 | 400.77 | 430.84 | 308.25 | 122.59 | 14.19 |
| GEHA | | | | | | | | | | | | |
| | High Self | 311 | 88.30 | 98.01 | 65.96 | 32.05 | 6.58 | 191.32 | 212.36 | 142.91 | 69.45 | 14.26 |
| | High Family | 312 | 190.46 | 211.41 | 142.27 | 69.14 | 13.62 | 412.66 | 458.06 | 308.25 | 149.81 | 29.52 |
| Mail Handlers | | | | | | | | | | | | |
| | High Self | 451 | 90.86 | 99.95 | 65.96 | 33.99 | 5.96 | 196.86 | 216.56 | 142.91 | 73.65 | 12.92 |
| | High Family | 452 | 195.21 | 210.83 | 142.27 | 68.56 | 8.29 | 422.96 | 456.80 | 308.25 | 148.55 | 17.96 |
| | Standard Self | 454 | 57.04 | 73.02 | 54.77 | 18.25 | 3.99 | 123.59 | 158.21 | 118.66 | 39.55 | 8.65 |
| | Standard Family | 455 | 123.81 | 158.48 | 118.86 | 39.62 | 8.67 | 268.26 | 343.37 | 257.53 | 85.84 | 18.78 |
| NALC | | | | | | | | | | | | |
| | High Self | 321 | 89.64 | 112.94 | 65.96 | 46.98 | 20.17 | 194.22 | 244.70 | 142.91 | 101.79 | 43.70 |
| | High Family | 322 | 191.55 | 241.35 | 142.27 | 99.08 | 42.47 | 415.03 | 522.93 | 308.25 | 214.68 | 92.02 |
| Postmasters | | | | | | | | | | | | |
| | High Self | 361 | 150.51 | 180.61 | 65.96 | 114.65 | 26.97 | 326.11 | 391.32 | 142.91 | 248.41 | 58.43 |
| | High Family | 362 | 324.73 | 389.68 | 142.27 | 247.41 | 57.62 | 703.58 | 844.31 | 308.25 | 536.06 | 124.85 |
| | Standard Self | 364 | 90.00 | 100.80 | 65.96 | 34.84 | 7.67 | 195.00 | 218.40 | 142.91 | 75.49 | 16.62 |
| | Standard Family | 365 | 194.68 | 218.04 | 142.27 | 75.77 | 16.03 | 421.81 | 472.42 | 308.25 | 164.17 | 34.73 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 2

| Managed Fee-For-Service Plans Plan, option and enrollment code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | | | |
|---|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|-------|--|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment | | |
| BACE | | | | | | | | | | | | |
| High Self | YD1 | 79.02 | 82.14 | 61.61 | 20.53 | 0.78 | 171.21 | 177.97 | 133.48 | 44.49 | 1.69 | |
| High Family | YD2 | 177.80 | 197.12 | 142.27 | 54.85 | 10.40 | 385.23 | 427.09 | 308.25 | 118.84 | 22.53 | |
| Foreign Service | | | | | | | | | | | | |
| High Self | 401 | 87.87 | 91.82 | 65.96 | 25.86 | 0.82 | 190.39 | 198.94 | 142.91 | 56.03 | 1.77 | |
| High Family | 402 | 213.66 | 223.27 | 142.27 | 81.00 | 2.28 | 462.93 | 483.75 | 308.25 | 175.50 | 4.94 | |
| Panama Canal Area | | | | | | | | | | | | |
| High Self | 431 | 82.94 | 92.06 | 65.96 | 26.10 | 5.37 | 179.70 | 199.46 | 142.91 | 56.55 | 11.63 | |
| High Family | 432 | 179.87 | 199.65 | 142.27 | 57.38 | 12.41 | 389.72 | 432.58 | 308.25 | 124.33 | 26.90 | |
| Rural Carrier Benefit Plan | | | | | | | | | | | | |
| High Self | 381 | 93.24 | 96.03 | 65.96 | 30.07 | -0.34 | 202.02 | 208.07 | 142.91 | 65.16 | -0.73 | |
| High Family | 382 | 190.08 | 195.78 | 142.27 | 53.51 | -1.63 | 411.84 | 424.19 | 308.25 | 115.94 | -3.53 | |
| SAMBA | | | | | | | | | | | | |
| High Self | 441 | 93.11 | 105.56 | 65.96 | 39.60 | 9.32 | 201.74 | 228.71 | 142.91 | 85.80 | 20.19 | |
| High Family | 442 | 219.15 | 254.61 | 142.27 | 112.34 | 28.13 | 474.83 | 551.66 | 308.25 | 243.41 | 60.95 | |
| Secret Service | | | | | | | | | | | | |
| High Self | Y71 | 76.88 | 76.88 | 57.66 | 19.22 | 0.00 | 166.57 | 166.57 | 124.93 | 41.64 | 0.00 | |
| High Family | Y72 | 182.19 | 182.19 | 136.64 | 45.55 | -1.70 | 394.75 | 394.75 | 296.06 | 98.69 | -3.69 | |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

| Plans offering a Point-of-Service (POS) Product Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------|-----------------------------|------------|------------|-------------------------|--------------------|----------------------------|-------------|------------|-------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this POS section, check the HMO section.]

| | | | | | | | | | | | | |
|---------------|-------------------------------|-----|----------|--------|--------|--------|--------|----------|--------|--------|--------|--------|
| <i>All</i> | Postmasters | | | | | | | | | | | |
| <i>States</i> | Standard Self | 364 | 90.00 | 100.80 | 65.96 | 34.84 | 7.67 | 195.00 | 218.40 | 142.91 | 75.49 | 16.62 |
| | Standard Family | 365 | 194.68 | 218.04 | 142.27 | 75.77 | 16.03 | 421.81 | 472.42 | 308.25 | 164.17 | 34.73 |
| <i>AZ</i> | Health Plan of Nevada | | | | | | | | | | | |
| | High Self | NM1 | 68.62 | 73.95 | 55.46 | 18.49 | 1.34 | 148.68 | 160.23 | 120.17 | 40.06 | 2.89 |
| | High Family | NM2 | 161.27 | 173.82 | 130.37 | 43.45 | 3.13 | 349.42 | 376.61 | 282.46 | 94.15 | 6.80 |
| <i>AR</i> | American HMO | | | | | | | | | | | |
| | High Self | RB1 | 72.77 | 73.99 | 55.49 | 18.50 | 0.31 | 157.67 | 160.31 | 120.23 | 40.08 | 0.66 |
| | High Family | RB2 | 189.14 | 181.19 | 135.89 | 45.30 | -8.90 | 409.80 | 392.58 | 294.44 | 98.14 | -19.29 |
| <i>AR</i> | QCA Health Plan | | | | | | | | | | | |
| | High Self | 8Q1 | New Plan | 87.61 | 65.71 | 21.90 | N/A | New Plan | 189.82 | 142.37 | 47.45 | N/A |
| | High Family | 8Q2 | New Plan | 203.17 | 142.27 | 60.90 | N/A | New Plan | 440.20 | 308.25 | 131.95 | N/A |
| <i>CO</i> | HMO Colorado/Nevada | | | | | | | | | | | |
| | High Self | L21 | 78.32 | 79.87 | 59.90 | 19.97 | 0.39 | 169.69 | 173.05 | 129.79 | 43.26 | 0.84 |
| | High Family | L22 | 195.82 | 199.65 | 142.27 | 57.38 | -3.50 | 424.28 | 432.58 | 308.25 | 124.33 | -7.58 |
| <i>CT</i> | Oxford Health Plans | | | | | | | | | | | |
| | High Self | ZW1 | 94.19 | 100.77 | 65.96 | 34.81 | 3.45 | 204.08 | 218.34 | 142.91 | 75.43 | 7.48 |
| | High Family | ZW2 | 248.78 | 266.12 | 142.27 | 123.85 | 10.01 | 539.02 | 576.59 | 308.25 | 268.34 | 21.69 |
| <i>CT</i> | Physicians Health Services/CT | | | | | | | | | | | |
| | High Self | DP1 | 111.50 | 104.96 | 65.96 | 39.00 | -9.67 | 241.58 | 227.41 | 142.91 | 84.50 | -20.95 |
| | High Family | DP2 | 287.88 | 273.98 | 142.27 | 131.71 | -21.23 | 623.74 | 593.62 | 308.25 | 285.37 | -46.00 |
| <i>DE</i> | BACE | | | | | | | | | | | |
| | High Self | YD1 | 79.02 | 82.14 | 61.61 | 20.53 | 0.78 | 171.21 | 177.97 | 133.48 | 44.49 | 1.69 |
| | High Family | YD2 | 177.80 | 197.12 | 142.27 | 54.85 | 10.40 | 385.23 | 427.09 | 308.25 | 118.84 | 22.53 |
| <i>DC</i> | BACE | | | | | | | | | | | |
| | High Self | YD1 | 79.02 | 82.14 | 61.61 | 20.53 | 0.78 | 171.21 | 177.97 | 133.48 | 44.49 | 1.69 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 5

| Plans offering a Point-of-Service (POS) Product Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------|-----------------------------|------------|------------|-------------------------|--------------------|----------------------------|-------------|------------|-------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this POS section, check the HMO section.]

| | | | | | | | | | | | | |
|----|-------------------------------|-----|----------|--------|--------|--------|-------|----------|--------|--------|--------|-------|
| | High Self | AC1 | 77.17 | 84.53 | 63.40 | 21.13 | 1.84 | 167.20 | 183.15 | 137.36 | 45.79 | 3.99 |
| | High Family | AC2 | 177.50 | 202.82 | 142.27 | 60.55 | 16.18 | 384.58 | 439.44 | 308.25 | 131.19 | 35.05 |
| KS | Blue Cross and Blue Shield | | | | | | | | | | | |
| | Standard Self | 104 | 82.97 | 89.18 | 65.96 | 23.22 | 2.48 | 179.77 | 193.22 | 142.91 | 50.31 | 5.37 |
| | Standard Family | 105 | 184.97 | 198.85 | 142.27 | 56.58 | 6.55 | 400.77 | 430.84 | 308.25 | 122.59 | 14.19 |
| LA | Blue Cross and Blue Shield | | | | | | | | | | | |
| | Standard Self | 104 | 82.97 | 89.18 | 65.96 | 23.22 | 2.48 | 179.77 | 193.22 | 142.91 | 50.31 | 5.37 |
| | Standard Family | 105 | 184.97 | 198.85 | 142.27 | 56.58 | 6.55 | 400.77 | 430.84 | 308.25 | 122.59 | 14.19 |
| LA | Maxicare Louisiana | | | | | | | | | | | |
| | High Self | JA1 | 71.96 | 71.47 | 53.60 | 17.87 | -0.12 | 155.91 | 154.85 | 116.14 | 38.71 | -0.27 |
| | High Family | JA2 | 167.48 | 166.34 | 124.76 | 41.58 | -0.29 | 362.87 | 360.40 | 270.30 | 90.10 | -0.62 |
| ME | NYLCare Health Plans of Maine | | | | | | | | | | | |
| | High Self | 9M1 | New Plan | 92.25 | 65.96 | 26.29 | N/A | New Plan | 199.88 | 142.91 | 56.97 | N/A |
| | High Family | 9M2 | New Plan | 217.70 | 142.27 | 75.43 | N/A | New Plan | 471.68 | 308.25 | 163.43 | N/A |
| MD | BACE | | | | | | | | | | | |
| | High Self | YD1 | 79.02 | 82.14 | 61.61 | 20.53 | 0.78 | 171.21 | 177.97 | 133.48 | 44.49 | 1.69 |
| | High Family | YD2 | 177.80 | 197.12 | 142.27 | 54.85 | 10.40 | 385.23 | 427.09 | 308.25 | 118.84 | 22.53 |
| MD | Columbia Medical Plan | | | | | | | | | | | |
| | High Self | 671 | 91.60 | 108.87 | 65.96 | 42.91 | 14.14 | 198.47 | 235.89 | 142.91 | 92.98 | 30.64 |
| | High Family | 672 | 232.18 | 261.26 | 142.27 | 118.99 | 21.75 | 503.06 | 566.06 | 308.25 | 257.81 | 47.12 |
| MD | Free State Health Plan | | | | | | | | | | | |
| | High Self | LD1 | 80.92 | 91.35 | 65.96 | 25.39 | 5.16 | 175.33 | 197.93 | 142.91 | 55.02 | 11.19 |
| | High Family | LD2 | 184.93 | 201.00 | 142.27 | 58.73 | 8.74 | 400.68 | 435.50 | 308.25 | 127.25 | 18.94 |
| MD | Preferred Health Network | | | | | | | | | | | |
| | High Self | 4P1 | 77.04 | 96.15 | 65.96 | 30.19 | 10.93 | 166.92 | 208.33 | 142.91 | 65.42 | 23.69 |
| | High Family | 4P2 | 200.47 | 250.18 | 142.27 | 107.91 | 42.38 | 434.35 | 542.06 | 308.25 | 233.81 | 91.83 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

| Plans offering a Point-of-Service (POS) Product Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------|-----------------------------|------------|------------|-------------------------|--------------------|----------------------------|-------------|------------|-------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this POS section, check the HMO section.]

| | | | | | | | | | | | | |
|----|--------------------------------|-----|----------|--------|--------|-------|-------|----------|--------|--------|--------|-------|
| MD | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | JB1 | 81.71 | 91.76 | 65.96 | 25.80 | 5.37 | 177.04 | 198.81 | 142.91 | 55.90 | 11.64 |
| | High Family | JB2 | 179.85 | 201.96 | 142.27 | 59.69 | 14.73 | 389.68 | 437.58 | 308.25 | 129.33 | 31.91 |
| MD | United HealthCare Mid-Atlantic | | | | | | | | | | | |
| | High Self | BL1 | 81.30 | 83.30 | 62.48 | 20.82 | 0.50 | 176.15 | 180.48 | 135.36 | 45.12 | 1.08 |
| | High Family | BL2 | 195.23 | 199.94 | 142.27 | 57.67 | -2.62 | 423.00 | 433.20 | 308.25 | 124.95 | -5.68 |
| MA | Blue Cross and Blue Shield | | | | | | | | | | | |
| | Standard Self | 104 | 82.97 | 89.18 | 65.96 | 23.22 | 2.48 | 179.77 | 193.22 | 142.91 | 50.31 | 5.37 |
| | Standard Family | 105 | 184.97 | 198.85 | 142.27 | 56.58 | 6.55 | 400.77 | 430.84 | 308.25 | 122.59 | 14.19 |
| MA | Coordinated Health Partners | | | | | | | | | | | |
| | High Self | DA1 | 69.88 | 86.02 | 64.52 | 21.50 | 4.03 | 151.41 | 186.38 | 139.79 | 46.59 | 8.74 |
| | High Family | DA2 | 178.90 | 220.20 | 142.27 | 77.93 | 33.21 | 387.62 | 477.10 | 308.25 | 168.85 | 71.95 |
| MA | United HealthCare New England | | | | | | | | | | | |
| | High Self | VF1 | 84.80 | 93.07 | 65.96 | 27.11 | 5.14 | 183.73 | 201.65 | 142.91 | 58.74 | 11.14 |
| | High Family | VF2 | 203.53 | 223.37 | 142.27 | 81.10 | 12.51 | 440.98 | 483.97 | 308.25 | 175.72 | 27.11 |
| MS | Integrity Health Plan | | | | | | | | | | | |
| | High Self | 4G1 | New Plan | 72.37 | 54.28 | 18.09 | N/A | New Plan | 156.80 | 117.60 | 39.20 | N/A |
| | High Family | 4G2 | New Plan | 183.81 | 137.86 | 45.95 | N/A | New Plan | 398.26 | 298.70 | 99.56 | N/A |
| NE | GEHA | | | | | | | | | | | |
| | High Self | 311 | 88.30 | 98.01 | 65.96 | 32.05 | 6.58 | 191.32 | 212.36 | 142.91 | 69.45 | 14.26 |
| | High Family | 312 | 190.46 | 211.41 | 142.27 | 69.14 | 13.62 | 412.66 | 458.06 | 308.25 | 149.81 | 29.52 |
| NV | Health Plan of Nevada | | | | | | | | | | | |
| | High Self | NM1 | 68.62 | 73.95 | 55.46 | 18.49 | 1.34 | 148.68 | 160.23 | 120.17 | 40.06 | 2.89 |
| | High Family | NM2 | 161.27 | 173.82 | 130.37 | 43.45 | 3.13 | 349.42 | 376.61 | 282.46 | 94.15 | 6.80 |
| NV | HMO Colorado/Nevada | | | | | | | | | | | |
| | High Self | VS1 | 72.46 | 83.68 | 62.76 | 20.92 | 2.81 | 157.00 | 181.31 | 135.98 | 45.33 | 6.08 |

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| Plans offering a Point-of-Service (POS) Product Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------|-----------------------------|------------|------------|-------------------------|--------------------|----------------------------|-------------|------------|-------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this POS section, check the HMO section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|----------|--------|--------|--------|--------|----------|--------|--------|--------|--------|
| | High Self | 801 | 98.87 | 86.73 | 65.05 | 21.68 | -14.36 | 214.22 | 187.92 | 140.94 | 46.98 | -31.11 |
| | High Family | 802 | 227.88 | 216.82 | 142.27 | 74.55 | -18.39 | 493.74 | 469.78 | 308.25 | 161.53 | -39.84 |
| NY | Oxford Health Plans | | | | | | | | | | | |
| | High Self | GC1 | 92.80 | 97.36 | 65.96 | 31.40 | 1.43 | 201.07 | 210.95 | 142.91 | 68.04 | 3.10 |
| | High Family | GC2 | 243.94 | 248.64 | 142.27 | 106.37 | -2.63 | 528.54 | 538.72 | 308.25 | 230.47 | -5.70 |
| NY | Physicians Health Svcs of NY | | | | | | | | | | | |
| | High Self | PD1 | 107.79 | 111.85 | 65.96 | 45.89 | 0.93 | 233.55 | 242.34 | 142.91 | 99.43 | 2.01 |
| | High Family | PD2 | 281.56 | 292.33 | 142.27 | 150.06 | 3.44 | 610.05 | 633.38 | 308.25 | 325.13 | 7.45 |
| NC | QualChoice of North Carolina | | | | | | | | | | | |
| | High Self | 7Q1 | New Plan | 78.78 | 59.09 | 19.69 | N/A | New Plan | 170.69 | 128.02 | 42.67 | N/A |
| | High Family | 7Q2 | New Plan | 191.80 | 142.27 | 49.53 | N/A | New Plan | 415.57 | 308.25 | 107.32 | N/A |
| OH | Blue Cross and Blue Shield | | | | | | | | | | | |
| | Standard Self | 104 | 82.97 | 89.18 | 65.96 | 23.22 | 2.48 | 179.77 | 193.22 | 142.91 | 50.31 | 5.37 |
| | Standard Family | 105 | 184.97 | 198.85 | 142.27 | 56.58 | 6.55 | 400.77 | 430.84 | 308.25 | 122.59 | 14.19 |
| OH | HealthFirst, Inc. | | | | | | | | | | | |
| | High Self | RF1 | 78.37 | 80.72 | 60.54 | 20.18 | 0.59 | 169.80 | 174.89 | 131.17 | 43.72 | 1.27 |
| | High Family | RF2 | 200.14 | 206.15 | 142.27 | 63.88 | -1.32 | 433.64 | 446.66 | 308.25 | 138.41 | -2.86 |
| OH | QualChoice Health Plan | | | | | | | | | | | |
| | High Self | 1Q1 | 69.97 | 69.97 | 52.48 | 17.49 | 0.00 | 151.60 | 151.60 | 113.70 | 37.90 | 0.00 |
| | High Family | 1Q2 | 174.96 | 174.96 | 131.22 | 43.74 | 0.00 | 379.08 | 379.08 | 284.31 | 94.77 | 0.00 |
| OK | Blue Cross and Blue Shield | | | | | | | | | | | |
| | Standard Self | 104 | 82.97 | 89.18 | 65.96 | 23.22 | 2.48 | 179.77 | 193.22 | 142.91 | 50.31 | 5.37 |
| | Standard Family | 105 | 184.97 | 198.85 | 142.27 | 56.58 | 6.55 | 400.77 | 430.84 | 308.25 | 122.59 | 14.19 |
| PA | Free State Health Plan | | | | | | | | | | | |
| | High Self | LD1 | 80.92 | 91.35 | 65.96 | 25.39 | 5.16 | 175.33 | 197.93 | 142.91 | 55.02 | 11.19 |
| | High Family | LD2 | 184.93 | 201.00 | 142.27 | 58.73 | 8.74 | 400.68 | 435.50 | 308.25 | 127.25 | 18.94 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 9

| Plans offering a Point-of-Service (POS) Product Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------|-----------------------------|------------|------------|-------------------------|--------------------|----------------------------|-------------|------------|-------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this POS section, check the HMO section.]

| | | | | | | | | | | | | |
|----|-------------------------------|-----|----------|--------|--------|-------|-------|----------|--------|--------|--------|--------|
| PA | Oxford Health Plans | | | | | | | | | | | |
| | High Self | 3W1 | 81.38 | 84.70 | 63.53 | 21.17 | 0.83 | 176.32 | 183.52 | 137.64 | 45.88 | 1.80 |
| | High Family | 3W2 | 222.37 | 221.55 | 142.27 | 79.28 | -8.15 | 481.80 | 480.03 | 308.25 | 171.78 | -17.65 |
| PA | Penn State Geisinger HlthPlan | | | | | | | | | | | |
| | High Self | N91 | 55.83 | 66.11 | 49.58 | 16.53 | 2.57 | 120.97 | 143.24 | 107.43 | 35.81 | 5.57 |
| | High Family | N92 | 172.98 | 204.93 | 142.27 | 62.66 | 19.42 | 374.79 | 444.02 | 308.25 | 135.77 | 42.07 |
| PR | PCA Health Plans/Puerto Rico | | | | | | | | | | | |
| | High Self | 5P1 | 62.57 | 65.70 | 49.28 | 16.42 | 0.78 | 135.57 | 142.35 | 106.76 | 35.59 | 1.70 |
| | High Family | 5P2 | 167.07 | 175.42 | 131.57 | 43.85 | 2.08 | 361.99 | 380.08 | 285.06 | 95.02 | 4.52 |
| PR | Triple-S | | | | | | | | | | | |
| | High Self | 891 | 81.13 | 81.13 | 60.85 | 20.28 | 0.00 | 175.78 | 175.78 | 131.84 | 43.94 | 0.00 |
| | High Family | 892 | 174.25 | 174.25 | 130.69 | 43.56 | 0.00 | 377.54 | 377.54 | 283.16 | 94.38 | 0.00 |
| PR | United HealthCare Puerto Rico | | | | | | | | | | | |
| | High Self | 7U1 | New Plan | 72.68 | 54.51 | 18.17 | N/A | New Plan | 157.47 | 118.10 | 39.37 | N/A |
| | High Family | 7U2 | New Plan | 156.75 | 117.56 | 39.19 | N/A | New Plan | 339.63 | 254.72 | 84.91 | N/A |
| RI | Coordinated Health Partners | | | | | | | | | | | |
| | High Self | DA1 | 69.88 | 86.02 | 64.52 | 21.50 | 4.03 | 151.41 | 186.38 | 139.79 | 46.59 | 8.74 |
| | High Family | DA2 | 178.90 | 220.20 | 142.27 | 77.93 | 33.21 | 387.62 | 477.10 | 308.25 | 168.85 | 71.95 |
| RI | United HealthCare New England | | | | | | | | | | | |
| | High Self | VF1 | 84.80 | 93.07 | 65.96 | 27.11 | 5.14 | 183.73 | 201.65 | 142.91 | 58.74 | 11.14 |
| | High Family | VF2 | 203.53 | 223.37 | 142.27 | 81.10 | 12.51 | 440.98 | 483.97 | 308.25 | 175.72 | 27.11 |
| TX | HMO Texas, L.C. | | | | | | | | | | | |
| | High Self | 2T1 | 71.67 | 77.10 | 57.83 | 19.27 | 1.35 | 155.29 | 167.05 | 125.29 | 41.76 | 2.94 |
| | High Family | 2T2 | 178.82 | 192.40 | 142.27 | 50.13 | 5.43 | 387.44 | 416.87 | 308.25 | 108.62 | 11.76 |
| VA | BACE | | | | | | | | | | | |
| | High Self | YD1 | 79.02 | 82.14 | 61.61 | 20.53 | 0.78 | 171.21 | 177.97 | 133.48 | 44.49 | 1.69 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

| Plans offering a Point-of-Service (POS) Product Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------|-----------------------------|------------|------------|-------------------------|--------------------|----------------------------|-------------|------------|-------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this POS section, check the HMO section.]

| | | | | | | | | | | | | |
|----|--------------------------------|-----|--------|--------|--------|-------|-------|--------|--------|--------|--------|-------|
| VA | High Family | YD2 | 177.80 | 197.12 | 142.27 | 54.85 | 10.40 | 385.23 | 427.09 | 308.25 | 118.84 | 22.53 |
| | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | JB1 | 81.71 | 91.76 | 65.96 | 25.80 | 5.37 | 177.04 | 198.81 | 142.91 | 55.90 | 11.64 |
| | High Family | JB2 | 179.85 | 201.96 | 142.27 | 59.69 | 14.73 | 389.68 | 437.58 | 308.25 | 129.33 | 31.91 |
| VA | United HealthCare Mid-Atlantic | | | | | | | | | | | |
| | High Self | BL1 | 81.30 | 83.30 | 62.48 | 20.82 | 0.50 | 176.15 | 180.48 | 135.36 | 45.12 | 1.08 |
| | High Family | BL2 | 195.23 | 199.94 | 142.27 | 57.67 | -2.62 | 423.00 | 433.20 | 308.25 | 124.95 | -5.68 |
| WV | BACE | | | | | | | | | | | |
| | High Self | YD1 | 79.02 | 82.14 | 61.61 | 20.53 | 0.78 | 171.21 | 177.97 | 133.48 | 44.49 | 1.69 |
| | High Family | YD2 | 177.80 | 197.12 | 142.27 | 54.85 | 10.40 | 385.23 | 427.09 | 308.25 | 118.84 | 22.53 |
| WV | Free State Health Plan | | | | | | | | | | | |
| | High Self | LD1 | 80.92 | 91.35 | 65.96 | 25.39 | 5.16 | 175.33 | 197.93 | 142.91 | 55.02 | 11.19 |
| | High Family | LD2 | 184.93 | 201.00 | 142.27 | 58.73 | 8.74 | 400.68 | 435.50 | 308.25 | 127.25 | 18.94 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - II

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|----------|--------|--------|--------|--------|----------|--------|--------|--------|--------|
| AL | Health Partners of Alabama | | | | | | | | | | | |
| | High Self | 5F1 | 59.24 | 77.65 | 58.24 | 19.41 | 4.60 | 128.35 | 168.24 | 126.18 | 42.06 | 9.97 |
| | High Family | 5F2 | 159.94 | 209.66 | 142.27 | 67.39 | 27.41 | 346.54 | 454.26 | 308.25 | 146.01 | 59.38 |
| AL | Health Partners of Alabama | | | | | | | | | | | |
| | High Self | DF1 | 85.01 | 78.40 | 58.80 | 19.60 | -2.58 | 184.19 | 169.87 | 127.40 | 42.47 | -5.59 |
| | High Family | DF2 | 217.60 | 200.68 | 142.27 | 58.41 | -24.25 | 471.47 | 434.81 | 308.25 | 126.56 | -52.54 |
| AL | Health Partners of Alabama | | | | | | | | | | | |
| | High Self | Z91 | 51.10 | 71.43 | 53.57 | 17.86 | 5.09 | 110.72 | 154.77 | 116.08 | 38.69 | 11.01 |
| | High Family | Z92 | 137.97 | 192.84 | 142.27 | 50.57 | 16.08 | 298.94 | 417.82 | 308.25 | 109.57 | 34.84 |
| AL | PrimeHealth of Alabama, Inc. | | | | | | | | | | | |
| | High Self | AA1 | 98.09 | 106.53 | 65.96 | 40.57 | 5.31 | 212.53 | 230.82 | 142.91 | 87.91 | 11.51 |
| | High Family | AA2 | 191.03 | 207.47 | 142.27 | 65.20 | 9.11 | 413.90 | 449.52 | 308.25 | 141.27 | 19.74 |
| AL | VIVA Health Plan | | | | | | | | | | | |
| | High Self | 4B1 | New Plan | 80.75 | 60.56 | 20.19 | N/A | New Plan | 174.96 | 131.22 | 43.74 | N/A |
| | High Family | 4B2 | New Plan | 201.86 | 142.27 | 59.59 | N/A | New Plan | 437.36 | 308.25 | 129.11 | N/A |
| AZ | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | WQ1 | 67.12 | 70.48 | 52.86 | 17.62 | 0.84 | 145.43 | 152.71 | 114.53 | 38.18 | 1.82 |
| | High Family | WQ2 | 188.61 | 198.04 | 142.27 | 55.77 | 2.10 | 408.66 | 429.09 | 308.25 | 120.84 | 4.55 |
| AZ | CIGNA HC of AZ-Phoenix | | | | | | | | | | | |
| | High Self | 161 | 74.93 | 74.90 | 56.18 | 18.72 | -0.01 | 162.35 | 162.28 | 121.71 | 40.57 | -0.02 |
| | High Family | 162 | 194.80 | 187.24 | 140.43 | 46.81 | -13.05 | 422.07 | 405.69 | 304.27 | 101.42 | -28.28 |
| AZ | HealthPartners Health Plans | | | | | | | | | | | |
| | High Self | 2S1 | 61.93 | 67.79 | 50.84 | 16.95 | 1.47 | 134.18 | 146.88 | 110.16 | 36.72 | 3.18 |
| | High Family | 2S2 | 176.54 | 193.25 | 142.27 | 50.98 | 6.85 | 382.50 | 418.71 | 308.25 | 110.46 | 14.84 |
| AZ | HealthPartners Health Plans | | | | | | | | | | | |
| | High Self | QS1 | 69.50 | 86.64 | 64.98 | 21.66 | 4.29 | 150.58 | 187.72 | 140.79 | 46.93 | 9.29 |
| | High Family | QS2 | 194.59 | 242.61 | 142.27 | 100.34 | 40.69 | 421.61 | 525.66 | 308.25 | 217.41 | 88.17 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 12

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-------------------------------|-----|--------|--------|--------|-------|-------|--------|--------|--------|--------|--------|
| AZ | HealthPartners Health Plans | | | | | | | | | | | |
| | High Self | TD1 | 52.82 | 60.49 | 45.37 | 15.12 | 1.92 | 114.44 | 131.06 | 98.30 | 32.76 | 4.15 |
| | High Family | TD2 | 147.90 | 169.36 | 127.02 | 42.34 | 5.37 | 320.45 | 366.95 | 275.21 | 91.74 | 11.63 |
| AZ | Humana Health Plan of AZ | | | | | | | | | | | |
| | High Self | DY1 | 57.28 | 62.22 | 46.67 | 15.55 | 1.23 | 124.11 | 134.81 | 101.11 | 33.70 | 2.67 |
| | High Family | DY2 | 155.78 | 169.23 | 126.92 | 42.31 | 3.37 | 337.52 | 366.67 | 275.00 | 91.67 | 7.29 |
| AZ | Intergroup of Arizona, Inc. | | | | | | | | | | | |
| | High Self | A71 | 55.60 | 67.90 | 50.93 | 16.97 | 3.07 | 120.47 | 147.12 | 110.34 | 36.78 | 6.66 |
| | High Family | A72 | 161.23 | 196.90 | 142.27 | 54.63 | 14.32 | 349.33 | 426.62 | 308.25 | 118.37 | 31.04 |
| AZ | PacifiCare of Arizona | | | | | | | | | | | |
| | High Self | A31 | 63.49 | 63.34 | 47.51 | 15.83 | -0.04 | 137.56 | 137.24 | 102.93 | 34.31 | -0.08 |
| | High Family | A32 | 177.83 | 177.59 | 133.19 | 44.40 | -0.06 | 385.30 | 384.78 | 288.59 | 96.19 | -0.13 |
| AZ | PacifiCare of Nevada | | | | | | | | | | | |
| | High Self | K91 | 70.32 | 62.72 | 47.04 | 15.68 | -1.90 | 152.36 | 135.89 | 101.92 | 33.97 | -4.12 |
| | High Family | K92 | 178.36 | 158.81 | 119.11 | 39.70 | -4.89 | 386.45 | 344.09 | 258.07 | 86.02 | -10.59 |
| AZ | Premier HealthCare of Arizona | | | | | | | | | | | |
| | High Self | 9A1 | 57.69 | 57.69 | 43.27 | 14.42 | 0.00 | 125.00 | 125.00 | 93.75 | 31.25 | 0.00 |
| | High Family | 9A2 | 158.02 | 158.02 | 118.52 | 39.50 | 0.00 | 342.38 | 342.38 | 256.79 | 85.59 | 0.00 |
| AZ | Premier HealthCare of Arizona | | | | | | | | | | | |
| | High Self | 9B1 | 69.24 | 71.32 | 53.49 | 17.83 | 0.52 | 150.02 | 154.53 | 115.90 | 38.63 | 1.13 |
| | High Family | 9B2 | 191.69 | 201.28 | 142.27 | 59.01 | 2.26 | 415.33 | 436.11 | 308.25 | 127.86 | 4.90 |
| AR | HEALTH ADVANTAGE | | | | | | | | | | | |
| | High Self | 3D1 | 77.93 | 77.93 | 58.45 | 19.48 | 0.00 | 168.85 | 168.85 | 126.64 | 42.21 | 0.00 |
| | High Family | 3D2 | 181.42 | 181.42 | 136.07 | 45.35 | -1.13 | 393.08 | 393.08 | 294.81 | 98.27 | -2.44 |
| AR | Healthsource Arkansas | | | | | | | | | | | |
| | High Self | 1H1 | 73.91 | 82.63 | 61.97 | 20.66 | 2.18 | 160.14 | 179.03 | 134.27 | 44.76 | 4.73 |
| | High Family | 1H2 | 197.08 | 220.33 | 142.27 | 78.06 | 15.92 | 427.01 | 477.38 | 308.25 | 169.13 | 34.49 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 13

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-------------------------------|-----|--------|--------|--------|-------|-------|--------|--------|--------|--------|--------|
| AR | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | VY1 | 71.30 | 80.74 | 60.56 | 20.18 | 2.36 | 154.48 | 174.94 | 131.21 | 43.73 | 5.11 |
| | High Family | VY2 | 178.04 | 179.98 | 134.99 | 44.99 | 0.48 | 385.75 | 389.96 | 292.47 | 97.49 | 1.05 |
| AR | United HealthCare of Arkansas | | | | | | | | | | | |
| | High Self | QC1 | 76.40 | 95.95 | 65.96 | 29.99 | 10.89 | 165.53 | 207.89 | 142.91 | 64.98 | 23.60 |
| | High Family | QC2 | 170.44 | 214.04 | 142.27 | 71.77 | 29.16 | 369.29 | 463.75 | 308.25 | 155.50 | 63.18 |
| CA | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | 2X1 | 66.71 | 80.13 | 60.10 | 20.03 | 3.35 | 144.54 | 173.62 | 130.22 | 43.40 | 7.27 |
| | High Family | 2X2 | 169.99 | 187.52 | 140.64 | 46.88 | 4.38 | 368.31 | 406.29 | 304.72 | 101.57 | 9.49 |
| CA | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | BU1 | 88.00 | 93.57 | 65.96 | 27.61 | 2.44 | 190.67 | 202.74 | 142.91 | 59.83 | 5.29 |
| | High Family | BU2 | 197.51 | 209.97 | 142.27 | 67.70 | 5.13 | 427.94 | 454.94 | 308.25 | 146.69 | 11.12 |
| CA | Blue Shield of CA Access+HMO | | | | | | | | | | | |
| | High Self | SJ1 | 66.88 | 73.70 | 55.28 | 18.42 | 1.70 | 144.91 | 159.68 | 119.76 | 39.92 | 3.69 |
| | High Family | SJ2 | 165.93 | 182.85 | 137.14 | 45.71 | 4.23 | 359.52 | 396.18 | 297.14 | 99.04 | 9.16 |
| CA | CaliforniaCare | | | | | | | | | | | |
| | High Self | M51 | 65.18 | 66.48 | 49.86 | 16.62 | 0.33 | 141.22 | 144.04 | 108.03 | 36.01 | 0.71 |
| | High Family | M52 | 166.29 | 169.61 | 127.21 | 42.40 | 0.83 | 360.30 | 367.49 | 275.62 | 91.87 | 1.80 |
| CA | CareAmerica HP | | | | | | | | | | | |
| | High Self | BG1 | 61.29 | 64.42 | 48.32 | 16.10 | 0.78 | 132.80 | 139.58 | 104.69 | 34.89 | 1.69 |
| | High Family | BG2 | 170.21 | 178.89 | 134.17 | 44.72 | 2.17 | 368.79 | 387.60 | 290.70 | 96.90 | 4.70 |
| CA | CIGNA HealthCare of CA | | | | | | | | | | | |
| | High Self | SK1 | 83.18 | 82.72 | 62.04 | 20.68 | -0.11 | 180.22 | 179.23 | 134.42 | 44.81 | -0.24 |
| | High Family | SK2 | 178.51 | 177.70 | 133.28 | 44.42 | -0.21 | 386.77 | 385.02 | 288.77 | 96.25 | -0.44 |
| CA | Foundation Health | | | | | | | | | | | |
| | High Self | 6R1 | 71.76 | 75.92 | 56.94 | 18.98 | 1.04 | 155.48 | 164.49 | 123.37 | 41.12 | 2.25 |
| | High Family | 6R2 | 187.13 | 178.46 | 133.85 | 44.61 | -7.58 | 405.45 | 386.66 | 290.00 | 96.66 | -16.42 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 14

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|--------|--------|--------|-------|--------|--------|--------|--------|--------|--------|
| CA | Foundation Health | | | | | | | | | | | |
| | High Self | C61 | 76.72 | 75.67 | 56.75 | 18.92 | -0.26 | 166.23 | 163.95 | 122.96 | 40.99 | -0.57 |
| | High Family | C62 | 200.03 | 177.94 | 133.46 | 44.48 | -20.61 | 433.40 | 385.54 | 289.16 | 96.38 | -44.65 |
| CA | Health Net | | | | | | | | | | | |
| | High Self | LB1 | 74.88 | 75.36 | 56.52 | 18.84 | 0.12 | 162.24 | 163.28 | 122.46 | 40.82 | 0.26 |
| | High Family | LB2 | 175.86 | 177.04 | 132.78 | 44.26 | 0.30 | 381.03 | 383.59 | 287.69 | 95.90 | 0.64 |
| CA | Kaiser Permanente | | | | | | | | | | | |
| | High Self | 591 | 71.68 | 71.60 | 53.70 | 17.90 | -0.02 | 155.31 | 155.13 | 116.35 | 38.78 | -0.05 |
| | High Family | 592 | 171.10 | 170.89 | 128.17 | 42.72 | -0.05 | 370.72 | 370.26 | 277.70 | 92.56 | -0.12 |
| CA | Kaiser Permanente | | | | | | | | | | | |
| | High Self | 621 | 77.86 | 81.63 | 61.22 | 20.41 | 0.95 | 168.70 | 176.87 | 132.65 | 44.22 | 2.05 |
| | High Family | 622 | 181.84 | 190.18 | 142.27 | 47.91 | 1.01 | 393.99 | 412.06 | 308.25 | 103.81 | 2.19 |
| CA | Maxicare Northern California | | | | | | | | | | | |
| | High Self | CX1 | 74.37 | 75.29 | 56.47 | 18.82 | 0.23 | 161.14 | 163.13 | 122.35 | 40.78 | 0.50 |
| | High Family | CX2 | 165.46 | 167.49 | 125.62 | 41.87 | 0.51 | 358.50 | 362.90 | 272.18 | 90.72 | 1.10 |
| CA | Maxicare Southern California | | | | | | | | | | | |
| | High Self | CM1 | 64.68 | 59.16 | 44.37 | 14.79 | -1.38 | 140.14 | 128.18 | 96.14 | 32.04 | -2.99 |
| | High Family | CM2 | 163.70 | 149.71 | 112.28 | 37.43 | -3.49 | 354.68 | 324.37 | 243.28 | 81.09 | -7.58 |
| CA | MetraHealth Care Plan | | | | | | | | | | | |
| | High Self | WA1 | 58.28 | 61.85 | 46.39 | 15.46 | 0.89 | 126.27 | 134.01 | 100.51 | 33.50 | 1.93 |
| | High Family | WA2 | 162.31 | 172.27 | 129.20 | 43.07 | 2.49 | 351.67 | 373.25 | 279.94 | 93.31 | 5.39 |
| CA | National HMO Health Plan | | | | | | | | | | | |
| | High Self | MN1 | 69.34 | 69.02 | 51.77 | 17.25 | -0.08 | 150.24 | 149.54 | 112.16 | 37.38 | -0.18 |
| | High Family | MN2 | 172.12 | 183.41 | 137.56 | 45.85 | 2.82 | 372.93 | 397.39 | 298.04 | 99.35 | 6.12 |
| CA | Omni Healthcare | | | | | | | | | | | |
| | High Self | HN1 | 74.77 | 80.84 | 60.63 | 20.21 | 1.52 | 162.00 | 175.15 | 131.36 | 43.79 | 3.29 |
| | High Family | HN2 | 188.09 | 203.36 | 142.27 | 61.09 | 7.94 | 407.53 | 440.61 | 308.25 | 132.36 | 17.20 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 15

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|--------------------------|-----|--------|--------|--------|-------|--------|--------|--------|--------|--------|--------|
| CA | PacifiCare of California | | | | | | | | | | | |
| | High Self | CY1 | 67.40 | 75.69 | 56.77 | 18.92 | 2.07 | 146.03 | 164.00 | 123.00 | 41.00 | 4.49 |
| | High Family | CY2 | 174.48 | 195.97 | 142.27 | 53.70 | 10.08 | 378.04 | 424.60 | 308.25 | 116.35 | 21.84 |
| CA | United Health Plan | | | | | | | | | | | |
| | High Self | C41 | 62.71 | 58.14 | 43.61 | 14.53 | -1.15 | 135.87 | 125.97 | 94.48 | 31.49 | -2.48 |
| | High Family | C42 | 135.77 | 125.86 | 94.40 | 31.46 | -2.48 | 294.17 | 272.70 | 204.53 | 68.17 | -5.37 |
| CO | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | 6F1 | 61.85 | 70.29 | 52.72 | 17.57 | 2.11 | 134.01 | 152.30 | 114.23 | 38.07 | 4.57 |
| | High Family | 6F2 | 160.96 | 187.12 | 140.34 | 46.78 | 6.54 | 348.75 | 405.43 | 304.07 | 101.36 | 14.17 |
| CO | Antero HealthPlans | | | | | | | | | | | |
| | High Self | 9X1 | 69.78 | 63.98 | 47.99 | 15.99 | -1.45 | 151.19 | 138.62 | 103.97 | 34.65 | -3.15 |
| | High Family | 9X2 | 173.47 | 173.62 | 130.22 | 43.40 | 0.03 | 375.85 | 376.18 | 282.14 | 94.04 | 0.08 |
| CO | CIGNA HealthCare of CO | | | | | | | | | | | |
| | High Self | 1C1 | 78.86 | 79.65 | 59.74 | 19.91 | 0.20 | 170.86 | 172.58 | 129.44 | 43.14 | 0.43 |
| | High Family | 1C2 | 189.28 | 191.17 | 142.27 | 48.90 | -5.44 | 410.11 | 414.20 | 308.25 | 105.95 | -11.79 |
| CO | Foundation Health | | | | | | | | | | | |
| | High Self | 2D1 | 70.91 | 68.59 | 51.44 | 17.15 | -0.58 | 153.64 | 148.61 | 111.46 | 37.15 | -1.26 |
| | High Family | 2D2 | 180.23 | 174.32 | 130.74 | 43.58 | -1.71 | 390.50 | 377.69 | 283.27 | 94.42 | -3.71 |
| CO | Kaiser Permanente | | | | | | | | | | | |
| | High Self | 651 | 69.70 | 72.49 | 54.37 | 18.12 | 0.70 | 151.02 | 157.06 | 117.80 | 39.26 | 1.51 |
| | High Family | 652 | 177.12 | 185.09 | 138.82 | 46.27 | 1.99 | 383.76 | 401.03 | 300.77 | 100.26 | 4.32 |
| CO | PacifiCare of Colorado | | | | | | | | | | | |
| | High Self | D61 | 75.47 | 71.70 | 53.78 | 17.92 | -0.95 | 163.52 | 155.35 | 116.51 | 38.84 | -2.04 |
| | High Family | D62 | 193.92 | 185.52 | 139.14 | 46.38 | -12.60 | 420.16 | 401.96 | 301.47 | 100.49 | -27.30 |
| | Standard Self | D64 | 64.93 | 63.61 | 47.71 | 15.90 | -0.33 | 140.68 | 137.82 | 103.37 | 34.45 | -0.72 |
| | Standard Family | D65 | 167.32 | 164.82 | 123.62 | 41.20 | -0.63 | 362.53 | 357.11 | 267.83 | 89.28 | -1.35 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 16

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-----------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| CO | Rocky Mountain HMO | | | | | | | | | | | |
| | High Self | 881 | 88.03 | 91.18 | 65.96 | 25.22 | 0.02 | 190.73 | 197.56 | 142.91 | 54.65 | 0.05 |
| | High Family | 882 | 205.87 | 213.23 | 142.27 | 70.96 | 0.03 | 446.05 | 462.00 | 308.25 | 153.75 | 0.07 |
| CT | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | H11 | 99.79 | 105.78 | 65.96 | 39.82 | 2.86 | 216.21 | 229.19 | 142.91 | 86.28 | 6.20 |
| | High Family | H12 | 268.11 | 284.20 | 142.27 | 141.93 | 8.76 | 580.91 | 615.77 | 308.25 | 307.52 | 18.98 |
| CT | ConnectiCare | | | | | | | | | | | |
| | High Self | TE1 | 112.28 | 117.20 | 65.96 | 51.24 | 1.79 | 243.27 | 253.93 | 142.91 | 111.02 | 3.88 |
| | High Family | TE2 | 249.33 | 260.25 | 142.27 | 117.98 | 3.59 | 540.22 | 563.88 | 308.25 | 255.63 | 7.78 |
| CT | Harvard Community Hlth Plan | | | | | | | | | | | |
| | High Self | 681 | 92.01 | 102.28 | 65.96 | 36.32 | 7.14 | 199.36 | 221.61 | 142.91 | 78.70 | 15.47 |
| | High Family | 682 | 243.85 | 271.04 | 142.27 | 128.77 | 19.86 | 528.34 | 587.25 | 308.25 | 279.00 | 43.03 |
| CT | Health New England | | | | | | | | | | | |
| | High Self | DJ1 | 82.47 | 94.56 | 65.96 | 28.60 | 7.98 | 178.69 | 204.88 | 142.91 | 61.97 | 17.30 |
| | High Family | DJ2 | 182.26 | 208.97 | 142.27 | 66.70 | 19.38 | 394.90 | 452.77 | 308.25 | 144.52 | 41.99 |
| CT | Kaiser Permanente | | | | | | | | | | | |
| | High Self | DM1 | 76.96 | 89.36 | 65.96 | 23.40 | 4.16 | 166.75 | 193.61 | 142.91 | 50.70 | 9.01 |
| | High Family | DM2 | 182.00 | 214.46 | 142.27 | 72.19 | 25.13 | 394.33 | 464.66 | 308.25 | 156.41 | 54.45 |
| CT | M.D. Health Plan | | | | | | | | | | | |
| | High Self | 1M1 | 95.95 | 101.00 | 65.96 | 35.04 | 1.92 | 207.89 | 218.83 | 142.91 | 75.92 | 4.16 |
| | High Family | 1M2 | 245.58 | 260.36 | 142.27 | 118.09 | 7.45 | 532.09 | 564.11 | 308.25 | 255.86 | 16.14 |
| CT | NYLCare Health Plans | | | | | | | | | | | |
| | High Self | HV1 | 78.22 | 89.45 | 65.96 | 23.49 | 3.94 | 169.48 | 193.81 | 142.91 | 50.90 | 8.53 |
| | High Family | HV2 | 203.34 | 232.58 | 142.27 | 90.31 | 21.91 | 440.57 | 503.92 | 308.25 | 195.67 | 47.47 |
| CT | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | 8C1 | 115.44 | 89.51 | 65.96 | 23.55 | -29.06 | 250.12 | 193.94 | 142.91 | 51.03 | -62.96 |
| | High Family | 8C2 | 283.42 | 283.08 | 142.27 | 140.81 | -7.67 | 614.08 | 613.34 | 308.25 | 305.09 | -16.62 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 17

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-----------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| CT | Suburban Health Plan, Inc. | | | | | | | | | | | |
| | High Self | 1S1 | 90.65 | 90.65 | 65.96 | 24.69 | -3.13 | 196.41 | 196.41 | 142.91 | 53.50 | -6.78 |
| | High Family | 1S2 | 237.59 | 237.59 | 142.27 | 95.32 | -7.33 | 514.78 | 514.78 | 308.25 | 206.53 | -15.88 |
| DE | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | NK1 | 105.23 | 115.75 | 65.96 | 49.79 | 7.39 | 228.00 | 250.79 | 142.91 | 107.88 | 16.01 |
| | High Family | NK2 | 292.64 | 321.90 | 142.27 | 179.63 | 21.93 | 634.05 | 697.45 | 308.25 | 389.20 | 47.52 |
| DE | AmeriHealth HMO, Inc. | | | | | | | | | | | |
| | High Self | SP1 | 81.55 | 88.54 | 65.96 | 22.58 | 2.19 | 176.69 | 191.84 | 142.91 | 48.93 | 4.76 |
| | High Family | SP2 | 214.79 | 233.16 | 142.27 | 90.89 | 11.04 | 465.38 | 505.18 | 308.25 | 196.93 | 23.92 |
| DC | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | V81 | 79.84 | 95.51 | 65.96 | 29.55 | 9.59 | 172.99 | 206.94 | 142.91 | 64.03 | 20.78 |
| | High Family | V82 | 175.38 | 233.42 | 142.27 | 91.15 | 47.31 | 379.99 | 505.74 | 308.25 | 197.49 | 102.49 |
| DC | CapitalCare | | | | | | | | | | | |
| | High Self | 2G1 | 64.63 | 73.48 | 55.11 | 18.37 | 2.21 | 140.03 | 159.21 | 119.41 | 39.80 | 4.79 |
| | High Family | 2G2 | 177.73 | 202.07 | 142.27 | 59.80 | 15.37 | 385.08 | 437.82 | 308.25 | 129.57 | 33.30 |
| DC | CareFirst | | | | | | | | | | | |
| | High Self | JQ1 | 87.91 | 95.79 | 65.96 | 29.83 | 4.75 | 190.47 | 207.55 | 142.91 | 64.64 | 10.30 |
| | High Family | JQ2 | 194.03 | 219.23 | 142.27 | 76.96 | 17.87 | 420.40 | 475.00 | 308.25 | 166.75 | 38.72 |
| DC | CIGNA HlthCare Mid-Atlantic | | | | | | | | | | | |
| | High Self | XF1 | 77.81 | 57.76 | 43.32 | 14.44 | -5.01 | 168.59 | 125.15 | 93.86 | 31.29 | -10.86 |
| | High Family | XF2 | 210.17 | 163.92 | 122.94 | 40.98 | -34.25 | 455.37 | 355.16 | 266.37 | 88.79 | -74.21 |
| DC | George Washington Univ HP | | | | | | | | | | | |
| | High Self | E51 | 94.91 | 104.49 | 65.96 | 38.53 | 6.45 | 205.64 | 226.40 | 142.91 | 83.49 | 13.98 |
| | High Family | E52 | 204.81 | 228.80 | 142.27 | 86.53 | 16.66 | 443.76 | 495.73 | 308.25 | 187.48 | 36.09 |
| | Standard Self | E54 | 63.09 | 68.26 | 51.20 | 17.06 | 1.29 | 136.70 | 147.90 | 110.93 | 36.97 | 2.80 |
| | Standard Family | E55 | 135.04 | 148.80 | 111.60 | 37.20 | 3.44 | 292.59 | 322.40 | 241.80 | 80.60 | 7.45 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 18

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-----------------------|-----|----------|--------|--------|--------|--------|----------|--------|--------|--------|--------|
| DC | Kaiser Permanente | | | | | | | | | | | |
| | High Self | E31 | 71.51 | 79.05 | 59.29 | 19.76 | 1.88 | 154.94 | 171.28 | 128.46 | 42.82 | 4.09 |
| | High Family | E32 | 176.44 | 195.22 | 142.27 | 52.95 | 8.84 | 382.29 | 422.98 | 308.25 | 114.73 | 19.16 |
| DC | MD-IPA | | | | | | | | | | | |
| | High Self | JP1 | 73.64 | 79.09 | 59.32 | 19.77 | 1.36 | 159.55 | 171.36 | 128.52 | 42.84 | 2.95 |
| | High Family | JP2 | 176.75 | 189.82 | 142.27 | 47.55 | 3.36 | 382.96 | 411.28 | 308.25 | 103.03 | 7.29 |
| DC | NYLCare/Mid-Atlantic | | | | | | | | | | | |
| | High Self | JN1 | 74.08 | 90.06 | 65.96 | 24.10 | 5.58 | 160.51 | 195.13 | 142.91 | 52.22 | 12.09 |
| | High Family | JN2 | 174.08 | 211.65 | 142.27 | 69.38 | 25.86 | 377.17 | 458.58 | 308.25 | 150.33 | 56.04 |
| | Standard Self | JN4 | 55.16 | 61.36 | 46.02 | 15.34 | 1.55 | 119.51 | 132.95 | 99.71 | 33.24 | 3.36 |
| | Standard Family | JN5 | 129.62 | 144.19 | 108.14 | 36.05 | 3.65 | 280.84 | 312.41 | 234.31 | 78.10 | 7.89 |
| FL | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | 8A1 | New Area | 89.07 | 65.96 | 23.11 | N/A | New Area | 192.99 | 142.91 | 50.08 | N/A |
| | High Family | 8A2 | New Area | 247.03 | 142.27 | 104.76 | N/A | New Area | 535.23 | 308.25 | 226.98 | N/A |
| FL | Av-Med Health Plan | | | | | | | | | | | |
| | High Self | EM1 | 69.39 | 71.19 | 53.39 | 17.80 | 0.45 | 150.35 | 154.25 | 115.69 | 38.56 | 0.97 |
| | High Family | EM2 | 190.81 | 195.73 | 142.27 | 53.46 | -2.41 | 413.42 | 424.08 | 308.25 | 115.83 | -5.22 |
| FL | Av-Med Health Plan | | | | | | | | | | | |
| | High Self | GP1 | 65.17 | 71.84 | 53.88 | 17.96 | 1.67 | 141.20 | 155.65 | 116.74 | 38.91 | 3.61 |
| | High Family | GP2 | 179.18 | 197.56 | 142.27 | 55.29 | 10.50 | 388.22 | 428.05 | 308.25 | 119.80 | 22.75 |
| FL | Av-Med Health Plan | | | | | | | | | | | |
| | High Self | H51 | 81.70 | 83.13 | 62.35 | 20.78 | 0.36 | 177.02 | 180.12 | 135.09 | 45.03 | 0.78 |
| | High Family | H52 | 224.64 | 228.57 | 142.27 | 86.30 | -3.40 | 486.72 | 495.24 | 308.25 | 186.99 | -7.36 |
| FL | Av-Med Health Plan | | | | | | | | | | | |
| | High Self | HW1 | 82.50 | 74.05 | 55.54 | 18.51 | -2.11 | 178.75 | 160.44 | 120.33 | 40.11 | -4.58 |
| | High Family | HW2 | 226.88 | 203.64 | 142.27 | 61.37 | -30.57 | 491.57 | 441.22 | 308.25 | 132.97 | -66.23 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 19

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|---------------------|-----|----------|--------|--------|-------|--------|----------|--------|--------|--------|--------|
| FL | Av-Med Health Plan | | | | | | | | | | | |
| | High Self | JF1 | 74.54 | 74.44 | 55.83 | 18.61 | -0.02 | 161.50 | 161.29 | 120.97 | 40.32 | -0.05 |
| | High Family | JF2 | 204.91 | 204.72 | 142.27 | 62.45 | -7.52 | 443.97 | 443.56 | 308.25 | 135.31 | -16.29 |
| FL | Beacon Health Plan | | | | | | | | | | | |
| | High Self | 4K1 | New Plan | 59.12 | 44.34 | 14.78 | N/A | New Plan | 128.09 | 96.07 | 32.02 | N/A |
| | High Family | 4K2 | New Plan | 165.56 | 124.17 | 41.39 | N/A | New Plan | 358.71 | 269.03 | 89.68 | N/A |
| FL | Capital Health Plan | | | | | | | | | | | |
| | High Self | EA1 | 74.00 | 73.69 | 55.27 | 18.42 | -0.08 | 160.33 | 159.66 | 119.75 | 39.91 | -0.17 |
| | High Family | EA2 | 198.35 | 196.79 | 142.27 | 54.52 | -8.89 | 429.76 | 426.38 | 308.25 | 118.13 | -19.26 |
| FL | Foundation Health | | | | | | | | | | | |
| | High Self | 5C1 | 64.33 | 50.81 | 38.11 | 12.70 | -3.38 | 139.38 | 110.09 | 82.57 | 27.52 | -7.32 |
| | High Family | 5C2 | 175.10 | 143.59 | 107.69 | 35.90 | -7.87 | 379.38 | 311.11 | 233.33 | 77.78 | -17.06 |
| FL | Foundation Health | | | | | | | | | | | |
| | High Self | 5D1 | 61.27 | 55.43 | 41.57 | 13.86 | -1.46 | 132.75 | 120.10 | 90.08 | 30.02 | -3.17 |
| | High Family | 5D2 | 195.07 | 156.59 | 117.44 | 39.15 | -20.98 | 422.65 | 339.28 | 254.46 | 84.82 | -45.46 |
| FL | Foundation Health | | | | | | | | | | | |
| | High Self | 5E1 | 71.66 | 42.87 | 32.15 | 10.72 | -7.19 | 155.26 | 92.89 | 69.67 | 23.22 | -15.59 |
| | High Family | 5E2 | 195.07 | 121.09 | 90.82 | 30.27 | -29.86 | 422.65 | 262.36 | 196.77 | 65.59 | -64.69 |
| FL | Health Options | | | | | | | | | | | |
| | High Self | D71 | 69.72 | 75.66 | 56.75 | 18.91 | 1.48 | 151.06 | 163.93 | 122.95 | 40.98 | 3.22 |
| | High Family | D72 | 186.86 | 202.90 | 142.27 | 60.63 | 8.71 | 404.86 | 439.62 | 308.25 | 131.37 | 18.88 |
| FL | Health Options | | | | | | | | | | | |
| | High Self | E81 | 65.98 | 76.44 | 57.33 | 19.11 | 2.62 | 142.96 | 165.62 | 124.22 | 41.40 | 5.66 |
| | High Family | E82 | 197.04 | 228.28 | 142.27 | 86.01 | 23.91 | 426.92 | 494.61 | 308.25 | 186.36 | 51.81 |
| FL | Health Options | | | | | | | | | | | |
| | High Self | FN1 | 62.16 | 73.21 | 54.91 | 18.30 | 2.76 | 134.68 | 158.62 | 118.97 | 39.65 | 5.98 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 20

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-----------------------|-----|----------|--------|--------|--------|-------|----------|--------|--------|--------|--------|
| FL | High Family | FN2 | 166.39 | 195.95 | 142.27 | 53.68 | 12.08 | 360.51 | 424.56 | 308.25 | 116.31 | 26.18 |
| | Health Options | | | | | | | | | | | |
| | High Self | FR1 | 61.64 | 68.40 | 51.30 | 17.10 | 1.69 | 133.55 | 148.20 | 111.15 | 37.05 | 3.66 |
| | High Family | FR2 | 166.39 | 184.63 | 138.47 | 46.16 | 4.56 | 360.51 | 400.03 | 300.02 | 100.01 | 9.88 |
| FL | Health Options | | | | | | | | | | | |
| | High Self | TH1 | 67.89 | 98.80 | 65.96 | 32.84 | 15.87 | 147.10 | 214.07 | 142.91 | 71.16 | 34.39 |
| | High Family | TH2 | 188.02 | 273.63 | 142.27 | 131.36 | 78.28 | 407.38 | 592.87 | 308.25 | 284.62 | 169.61 |
| FL | Health Options | | | | | | | | | | | |
| | High Self | XN1 | 84.82 | 101.26 | 65.96 | 35.30 | 13.31 | 183.78 | 219.40 | 142.91 | 76.49 | 28.84 |
| | High Family | XN2 | 202.86 | 239.72 | 142.27 | 97.45 | 29.53 | 439.53 | 519.39 | 308.25 | 211.14 | 63.98 |
| FL | Healthplan Southeast | | | | | | | | | | | |
| | High Self | 3E1 | 71.68 | 76.37 | 57.28 | 19.09 | 1.17 | 155.31 | 165.47 | 124.10 | 41.37 | 2.54 |
| | High Family | 3E2 | 198.08 | 204.96 | 142.27 | 62.69 | -0.45 | 429.17 | 444.08 | 308.25 | 135.83 | -0.97 |
| FL | HIP Health Plan of FL | | | | | | | | | | | |
| | High Self | K71 | 72.22 | 81.88 | 61.41 | 20.47 | 2.42 | 156.48 | 177.41 | 133.06 | 44.35 | 5.23 |
| | High Family | K72 | 177.21 | 229.24 | 142.27 | 86.97 | 42.67 | 383.96 | 496.69 | 308.25 | 188.44 | 92.45 |
| FL | Humana Medical Plan | | | | | | | | | | | |
| | High Self | 7F1 | New Code | 64.55 | 48.41 | 16.14 | N/A | New Code | 139.86 | 104.90 | 34.96 | N/A |
| | High Family | 7F2 | New Code | 180.79 | 135.59 | 45.20 | N/A | New Code | 391.71 | 293.78 | 97.93 | N/A |
| FL | Humana Medical Plan | | | | | | | | | | | |
| | High Self | EE1 | 48.53 | 75.60 | 56.70 | 18.90 | 6.77 | 105.15 | 163.80 | 122.85 | 40.95 | 14.66 |
| | High Family | EE2 | 138.67 | 189.01 | 141.76 | 47.25 | 12.58 | 300.45 | 409.52 | 307.14 | 102.38 | 27.27 |
| FL | Humana Medical Plan | | | | | | | | | | | |
| | High Self | JH1 | 64.64 | 74.60 | 55.95 | 18.65 | 2.49 | 140.05 | 161.63 | 121.22 | 40.41 | 5.40 |
| | High Family | JH2 | 184.76 | 186.52 | 139.89 | 46.63 | -3.19 | 400.31 | 404.13 | 303.10 | 101.03 | -6.91 |
| FL | Humana Medical Plan | | | | | | | | | | | |
| | High Self | P51 | 63.46 | 72.05 | 54.04 | 18.01 | 2.15 | 137.50 | 156.11 | 117.08 | 39.03 | 4.66 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 21

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|--------|--------|--------|--------|-------|--------|--------|--------|--------|--------|
| FL | High Family | P52 | 177.73 | 201.80 | 142.27 | 59.53 | 15.10 | 385.08 | 437.23 | 308.25 | 128.98 | 32.71 |
| | Humana Medical Plan | | | | | | | | | | | |
| | High Self | P71 | 64.91 | 73.12 | 54.84 | 18.28 | 2.05 | 140.64 | 158.43 | 118.82 | 39.61 | 4.45 |
| | High Family | P72 | 181.74 | 204.76 | 142.27 | 62.49 | 15.69 | 393.77 | 443.65 | 308.25 | 135.40 | 34.00 |
| FL | PCA Family Health Plan of FL | | | | | | | | | | | |
| | High Self | FQ1 | 59.80 | 58.74 | 44.06 | 14.68 | -0.27 | 129.57 | 127.27 | 95.45 | 31.82 | -0.57 |
| | High Family | FQ2 | 179.42 | 176.27 | 132.20 | 44.07 | -0.78 | 388.74 | 381.92 | 286.44 | 95.48 | -1.70 |
| FL | PCA Health Plans of Florida | | | | | | | | | | | |
| | High Self | PJ1 | 59.80 | 58.74 | 44.06 | 14.68 | -0.27 | 129.57 | 127.27 | 95.45 | 31.82 | -0.57 |
| | High Family | PJ2 | 179.42 | 176.27 | 132.20 | 44.07 | -0.78 | 388.74 | 381.92 | 286.44 | 95.48 | -1.70 |
| FL | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | EC1 | 64.14 | 61.45 | 46.09 | 15.36 | -0.67 | 138.97 | 133.14 | 99.86 | 33.28 | -1.46 |
| | High Family | EC2 | 176.38 | 169.00 | 126.75 | 42.25 | -1.84 | 382.16 | 366.17 | 274.63 | 91.54 | -4.00 |
| FL | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | EH1 | 58.77 | 61.70 | 46.28 | 15.42 | 0.73 | 127.34 | 133.68 | 100.26 | 33.42 | 1.59 |
| | High Family | EH2 | 164.55 | 172.78 | 129.59 | 43.19 | 2.05 | 356.53 | 374.36 | 280.77 | 93.59 | 4.46 |
| FL | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | HE1 | 62.50 | 66.25 | 49.69 | 16.56 | 0.94 | 135.42 | 143.54 | 107.66 | 35.88 | 2.03 |
| | High Family | HE2 | 175.03 | 185.50 | 139.13 | 46.37 | 2.61 | 379.23 | 401.92 | 301.44 | 100.48 | 5.67 |
| FL | United HealthCare of FL | | | | | | | | | | | |
| | High Self | QK1 | 75.64 | 94.50 | 65.96 | 28.54 | 9.63 | 163.89 | 204.75 | 142.91 | 61.84 | 20.87 |
| | High Family | QK2 | 196.66 | 250.43 | 142.27 | 108.16 | 46.44 | 426.10 | 542.60 | 308.25 | 234.35 | 100.62 |
| GA | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | 2U1 | 71.30 | 76.29 | 57.22 | 19.07 | 1.25 | 154.48 | 165.30 | 123.98 | 41.32 | 2.70 |
| | High Family | 2U2 | 186.89 | 196.68 | 142.27 | 54.41 | 2.46 | 404.93 | 426.14 | 308.25 | 117.89 | 5.33 |
| GA | BlueChoice Healthcare Plan | | | | | | | | | | | |
| | High Self | 1B1 | 70.93 | 72.10 | 54.08 | 18.02 | 0.29 | 153.68 | 156.22 | 117.17 | 39.05 | 0.63 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 22

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|---------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|---------|
| GA | High Family | 1B2 | 198.59 | 209.01 | 142.27 | 66.74 | 3.09 | 430.28 | 452.86 | 308.25 | 144.61 | 6.70 |
| | HealthSource of Georgia | | | | | | | | | | | |
| | High Self | 7H1 | 81.26 | 66.50 | 49.88 | 16.62 | -3.69 | 176.06 | 144.08 | 108.06 | 36.02 | -7.99 |
| | High Family | 7H2 | 243.78 | 182.78 | 137.09 | 45.69 | -63.15 | 528.19 | 396.02 | 297.02 | 99.00 | -136.82 |
| GA | HPC Health Plans of GA | | | | | | | | | | | |
| | High Self | WU1 | 73.35 | 91.37 | 65.96 | 25.41 | 7.07 | 158.93 | 197.97 | 142.91 | 55.06 | 15.33 |
| | High Family | WU2 | 186.21 | 232.07 | 142.27 | 89.80 | 38.53 | 403.46 | 502.82 | 308.25 | 194.57 | 83.48 |
| GA | Kaiser Permanente | | | | | | | | | | | |
| | High Self | F81 | 73.68 | 78.23 | 58.67 | 19.56 | 1.14 | 159.64 | 169.50 | 127.13 | 42.37 | 2.46 |
| | High Family | F82 | 187.06 | 198.60 | 142.27 | 56.33 | 4.21 | 405.30 | 430.30 | 308.25 | 122.05 | 9.12 |
| GA | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | EZ1 | 63.33 | 62.91 | 47.18 | 15.73 | -0.10 | 137.22 | 136.31 | 102.23 | 34.08 | -0.22 |
| | High Family | EZ2 | 173.27 | 172.14 | 129.11 | 43.03 | -0.29 | 375.42 | 372.97 | 279.73 | 93.24 | -0.61 |
| GU | FHP of Guam | | | | | | | | | | | |
| | High Self | JK1 | 84.14 | 91.35 | 65.96 | 25.39 | 4.08 | 182.30 | 197.93 | 142.91 | 55.02 | 8.85 |
| | High Family | JK2 | 222.11 | 241.47 | 142.27 | 99.20 | 12.03 | 481.24 | 523.19 | 308.25 | 214.94 | 26.07 |
| GU | Guam Memorial Health Plan | | | | | | | | | | | |
| | High Self | ZA1 | 80.66 | 91.15 | 65.96 | 25.19 | 5.03 | 174.76 | 197.49 | 142.91 | 54.58 | 10.89 |
| | High Family | ZA2 | 202.01 | 228.27 | 142.27 | 86.00 | 18.93 | 437.69 | 494.59 | 308.25 | 186.34 | 41.02 |
| | Standard Self | ZA4 | 59.18 | 66.87 | 50.15 | 16.72 | 1.93 | 128.22 | 144.89 | 108.67 | 36.22 | 4.17 |
| | Standard Family | ZA5 | 166.02 | 187.60 | 140.70 | 46.90 | 5.40 | 359.71 | 406.47 | 304.85 | 101.62 | 11.69 |
| GU | Health Maintenance Life | | | | | | | | | | | |
| | High Self | 281 | 57.77 | 67.14 | 50.36 | 16.78 | 2.34 | 125.17 | 145.47 | 109.10 | 36.37 | 5.08 |
| | High Family | 282 | 172.90 | 201.06 | 142.27 | 58.79 | 15.57 | 374.62 | 435.63 | 308.25 | 127.38 | 33.73 |
| HI | HMSA's CHP | | | | | | | | | | | |
| | High Self | 9Q1 | 105.35 | 114.66 | 65.96 | 48.70 | 6.18 | 228.26 | 248.43 | 142.91 | 105.52 | 13.39 |
| | High Family | 9Q2 | 293.94 | 246.55 | 142.27 | 104.28 | -54.72 | 636.87 | 534.19 | 308.25 | 225.94 | -118.56 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 23

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------|-----|--------|--------|--------|--------|-------|--------|--------|--------|--------|--------|
| HI | Kaiser Permanente | | | | | | | | | | | |
| | High Self | 631 | 98.66 | 106.57 | 65.96 | 40.61 | 4.78 | 213.76 | 230.90 | 142.91 | 87.99 | 10.36 |
| | High Family | 632 | 212.12 | 229.12 | 142.27 | 86.85 | 9.67 | 459.59 | 496.43 | 308.25 | 188.18 | 20.96 |
| | Standard Self | 634 | 78.96 | 86.08 | 64.56 | 21.52 | 1.78 | 171.08 | 186.51 | 139.88 | 46.63 | 3.86 |
| | Standard Family | 635 | 169.75 | 185.07 | 138.80 | 46.27 | 3.83 | 367.79 | 400.99 | 300.74 | 100.25 | 8.30 |
| ID | Group Health Northwest | | | | | | | | | | | |
| | High Self | VR1 | 79.14 | 95.18 | 65.96 | 29.22 | 9.44 | 171.47 | 206.22 | 142.91 | 63.31 | 20.44 |
| | High Family | VR2 | 201.83 | 242.57 | 142.27 | 100.30 | 33.41 | 437.30 | 525.57 | 308.25 | 217.32 | 72.39 |
| ID | QualMed WA Health Plan | | | | | | | | | | | |
| | High Self | TM1 | 80.46 | 84.14 | 63.11 | 21.03 | 0.92 | 174.33 | 182.30 | 136.73 | 45.57 | 1.99 |
| | High Family | TM2 | 200.78 | 204.10 | 142.27 | 61.83 | -4.01 | 435.02 | 442.22 | 308.25 | 133.97 | -8.68 |
| IL | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | XC1 | 64.00 | 69.21 | 51.91 | 17.30 | 1.30 | 138.67 | 149.96 | 112.47 | 37.49 | 2.82 |
| | High Family | XC2 | 202.00 | 218.46 | 142.27 | 76.19 | 9.13 | 437.67 | 473.33 | 308.25 | 165.08 | 19.78 |
| IL | BCI HMO, Inc. | | | | | | | | | | | |
| | High Self | 3B1 | 81.15 | 97.39 | 65.96 | 31.43 | 11.14 | 175.83 | 211.01 | 142.91 | 68.10 | 24.14 |
| | High Family | 3B2 | 204.71 | 245.66 | 142.27 | 103.39 | 33.62 | 443.54 | 532.26 | 308.25 | 224.01 | 72.84 |
| IL | FHP of Illinois, Inc. | | | | | | | | | | | |
| | High Self | FY1 | 73.82 | 81.34 | 61.01 | 20.33 | 1.88 | 159.94 | 176.24 | 132.18 | 44.06 | 4.08 |
| | High Family | FY2 | 170.54 | 187.94 | 140.96 | 46.98 | 4.35 | 369.50 | 407.20 | 305.40 | 101.80 | 9.43 |
| IL | Group Health Plan | | | | | | | | | | | |
| | High Self | MM1 | 73.38 | 99.63 | 65.96 | 33.67 | 15.33 | 158.99 | 215.87 | 142.91 | 72.96 | 33.21 |
| | High Family | MM2 | 183.47 | 249.06 | 142.27 | 106.79 | 58.26 | 397.52 | 539.63 | 308.25 | 231.38 | 126.23 |
| IL | Health Alliance HMO | | | | | | | | | | | |
| | High Self | FX1 | 87.36 | 89.11 | 65.96 | 23.15 | -1.38 | 189.28 | 193.07 | 142.91 | 50.16 | -2.99 |
| | High Family | FX2 | 203.84 | 208.00 | 142.27 | 65.73 | -3.17 | 441.65 | 450.67 | 308.25 | 142.42 | -6.86 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 24

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|----------|--------|--------|-------|--------|----------|--------|--------|--------|--------|
| IL | Heritage National Healthplan | | | | | | | | | | | |
| | High Self | 3J1 | 79.06 | 86.15 | 64.61 | 21.54 | 1.78 | 171.30 | 186.66 | 140.00 | 46.66 | 3.84 |
| | High Family | 3J2 | 175.00 | 191.55 | 142.27 | 49.28 | 5.53 | 379.17 | 415.03 | 308.25 | 106.78 | 11.99 |
| IL | Humana Health Plan Inc. | | | | | | | | | | | |
| | High Self | 751 | 79.07 | 81.37 | 61.03 | 20.34 | 0.57 | 171.32 | 176.30 | 132.23 | 44.07 | 1.24 |
| | High Family | 752 | 196.42 | 202.12 | 142.27 | 59.85 | -1.63 | 425.58 | 437.93 | 308.25 | 129.68 | -3.53 |
| IL | John Deere Family Healthplan | | | | | | | | | | | |
| | High Self | 1J1 | 65.64 | 72.22 | 54.17 | 18.05 | 1.64 | 142.22 | 156.48 | 117.36 | 39.12 | 3.57 |
| | High Family | 1J2 | 155.06 | 170.59 | 127.94 | 42.65 | 3.89 | 335.96 | 369.61 | 277.21 | 92.40 | 8.41 |
| IL | Maxicare Illinois | | | | | | | | | | | |
| | High Self | FV1 | 82.31 | 80.64 | 60.48 | 20.16 | -0.42 | 178.34 | 174.72 | 131.04 | 43.68 | -0.90 |
| | High Family | FV2 | 201.70 | 197.60 | 142.27 | 55.33 | -11.43 | 437.02 | 428.13 | 308.25 | 119.88 | -24.77 |
| IL | Maxicare Illinois | | | | | | | | | | | |
| | High Self | VG1 | 96.91 | 90.51 | 65.96 | 24.55 | -9.53 | 209.97 | 196.11 | 142.91 | 53.20 | -20.64 |
| | High Family | VG2 | 232.09 | 216.76 | 142.27 | 74.49 | -22.66 | 502.86 | 469.65 | 308.25 | 161.40 | -49.09 |
| IL | Mercy Health Plans/Premier | | | | | | | | | | | |
| | High Self | 7M1 | New Plan | 88.02 | 65.96 | 22.06 | N/A | New Plan | 190.71 | 142.91 | 47.80 | N/A |
| | High Family | 7M2 | New Plan | 204.72 | 142.27 | 62.45 | N/A | New Plan | 443.56 | 308.25 | 135.31 | N/A |
| IL | NYLCare HP of the Midwest | | | | | | | | | | | |
| | High Self | XA1 | 73.02 | 77.37 | 58.03 | 19.34 | 1.09 | 158.21 | 167.64 | 125.73 | 41.91 | 2.36 |
| | High Family | XA2 | 189.81 | 201.12 | 142.27 | 58.85 | 3.98 | 411.26 | 435.76 | 308.25 | 127.51 | 8.62 |
| IL | OSF Health Plans | | | | | | | | | | | |
| | High Self | 9F1 | New Plan | 69.43 | 52.07 | 17.36 | N/A | New Plan | 150.43 | 112.82 | 37.61 | N/A |
| | High Family | 9F2 | New Plan | 183.98 | 137.99 | 45.99 | N/A | New Plan | 398.62 | 298.97 | 99.65 | N/A |
| IL | PARTNERS HMO | | | | | | | | | | | |
| | High Self | RN1 | 85.23 | 83.46 | 62.60 | 20.86 | -1.54 | 184.67 | 180.83 | 135.62 | 45.21 | -3.33 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 25

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|---------------------------|-----|--------|--------|--------|-------|--------|--------|--------|--------|--------|--------|
| IL | High Family | RN2 | 183.24 | 181.33 | 136.00 | 45.33 | -2.97 | 397.02 | 392.88 | 294.66 | 98.22 | -6.43 |
| | PersonalCare's HMO | | | | | | | | | | | |
| | High Self | GE1 | 75.25 | 75.28 | 56.46 | 18.82 | 0.01 | 163.04 | 163.11 | 122.33 | 40.78 | 0.02 |
| | High Family | GE2 | 194.28 | 193.56 | 142.27 | 51.29 | -8.05 | 420.94 | 419.38 | 308.25 | 111.13 | -17.44 |
| IL | Principal St.Louis | | | | | | | | | | | |
| | High Self | 121 | 88.78 | 86.27 | 64.70 | 21.57 | -4.38 | 192.36 | 186.92 | 140.19 | 46.73 | -9.50 |
| | High Family | 122 | 193.55 | 188.07 | 141.05 | 47.02 | -11.59 | 419.36 | 407.49 | 305.62 | 101.87 | -25.12 |
| IL | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | VZ1 | 73.34 | 68.72 | 51.54 | 17.18 | -1.15 | 158.90 | 148.89 | 111.67 | 37.22 | -2.50 |
| | High Family | VZ2 | 185.29 | 173.62 | 130.22 | 43.40 | -6.95 | 401.46 | 376.18 | 282.14 | 94.04 | -15.05 |
| IL | Rush Prudential HMO | | | | | | | | | | | |
| | High Self | 171 | 71.45 | 71.69 | 53.77 | 17.92 | 0.06 | 154.81 | 155.33 | 116.50 | 38.83 | 0.13 |
| | High Family | 172 | 171.90 | 172.47 | 129.35 | 43.12 | 0.15 | 372.45 | 373.69 | 280.27 | 93.42 | 0.31 |
| IL | Union Health Service | | | | | | | | | | | |
| | High Self | 761 | 84.43 | 76.58 | 57.44 | 19.14 | -2.46 | 182.93 | 165.92 | 124.44 | 41.48 | -5.32 |
| | High Family | 762 | 209.38 | 189.90 | 142.27 | 47.63 | -26.81 | 453.66 | 411.45 | 308.25 | 103.20 | -58.09 |
| IL | United HealthCare of IL | | | | | | | | | | | |
| | High Self | FP1 | 81.93 | 72.12 | 54.09 | 18.03 | -2.45 | 177.52 | 156.26 | 117.20 | 39.06 | -5.32 |
| | High Family | FP2 | 188.50 | 190.21 | 142.27 | 47.94 | -5.62 | 408.42 | 412.12 | 308.25 | 103.87 | -12.18 |
| IL | United HealthCare Select | | | | | | | | | | | |
| | High Self | H81 | 70.98 | 88.32 | 65.96 | 22.36 | 4.62 | 153.79 | 191.36 | 142.91 | 48.45 | 10.00 |
| | High Family | H82 | 163.32 | 203.21 | 142.27 | 60.94 | 20.11 | 353.86 | 440.29 | 308.25 | 132.04 | 43.58 |
| IN | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | XC1 | 64.00 | 69.21 | 51.91 | 17.30 | 1.30 | 138.67 | 149.96 | 112.47 | 37.49 | 2.82 |
| | High Family | XC2 | 202.00 | 218.46 | 142.27 | 76.19 | 9.13 | 437.67 | 473.33 | 308.25 | 165.08 | 19.78 |
| IN | Arnett HMO | | | | | | | | | | | |
| | High Self | G21 | 91.98 | 96.19 | 65.96 | 30.23 | 1.08 | 199.29 | 208.41 | 142.91 | 65.50 | 2.34 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 26

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|--------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| IN | High Family | G22 | 239.15 | 250.08 | 142.27 | 107.81 | 3.60 | 518.16 | 541.84 | 308.25 | 233.59 | 7.80 |
| | BCI HMO, Inc. | | | | | | | | | | | |
| | High Self | 3B1 | 81.15 | 97.39 | 65.96 | 31.43 | 11.14 | 175.83 | 211.01 | 142.91 | 68.10 | 24.14 |
| | High Family | 3B2 | 204.71 | 245.66 | 142.27 | 103.39 | 33.62 | 443.54 | 532.26 | 308.25 | 224.01 | 72.84 |
| IN | FHP of Illinois, Inc. | | | | | | | | | | | |
| | High Self | FY1 | 73.82 | 81.34 | 61.01 | 20.33 | 1.88 | 159.94 | 176.24 | 132.18 | 44.06 | 4.08 |
| | High Family | FY2 | 170.54 | 187.94 | 140.96 | 46.98 | 4.35 | 369.50 | 407.20 | 305.40 | 101.80 | 9.43 |
| IN | Health Alliance HMO | | | | | | | | | | | |
| | High Self | FX1 | 87.36 | 89.11 | 65.96 | 23.15 | -1.38 | 189.28 | 193.07 | 142.91 | 50.16 | -2.99 |
| | High Family | FX2 | 203.84 | 208.00 | 142.27 | 65.73 | -3.17 | 441.65 | 450.67 | 308.25 | 142.42 | -6.86 |
| IN | Humana Care Plan | | | | | | | | | | | |
| | High Self | 181 | 79.38 | 85.53 | 64.15 | 21.38 | 1.54 | 171.99 | 185.32 | 138.99 | 46.33 | 3.33 |
| | High Family | 182 | 205.71 | 221.62 | 142.27 | 79.35 | 8.58 | 445.71 | 480.18 | 308.25 | 171.93 | 18.59 |
| IN | Humana Health Plan Inc. | | | | | | | | | | | |
| | High Self | 751 | 79.07 | 81.37 | 61.03 | 20.34 | 0.57 | 171.32 | 176.30 | 132.23 | 44.07 | 1.24 |
| | High Family | 752 | 196.42 | 202.12 | 142.27 | 59.85 | -1.63 | 425.58 | 437.93 | 308.25 | 129.68 | -3.53 |
| IN | Humana Health Plan | | | | | | | | | | | |
| | High Self | D21 | 82.96 | 86.77 | 65.08 | 21.69 | 0.95 | 179.75 | 188.00 | 141.00 | 47.00 | 2.06 |
| | High Family | D22 | 214.97 | 224.86 | 142.27 | 82.59 | 2.56 | 465.77 | 487.20 | 308.25 | 178.95 | 5.55 |
| IN | Maxicare Illinois | | | | | | | | | | | |
| | High Self | FV1 | 82.31 | 80.64 | 60.48 | 20.16 | -0.42 | 178.34 | 174.72 | 131.04 | 43.68 | -0.90 |
| | High Family | FV2 | 201.70 | 197.60 | 142.27 | 55.33 | -11.43 | 437.02 | 428.13 | 308.25 | 119.88 | -24.77 |
| IN | Maxicare Indiana | | | | | | | | | | | |
| | High Self | GK1 | 77.68 | 78.26 | 58.70 | 19.56 | 0.14 | 168.31 | 169.56 | 127.17 | 42.39 | 0.31 |
| | High Family | GK2 | 182.88 | 184.24 | 138.18 | 46.06 | -1.88 | 396.24 | 399.19 | 299.39 | 99.80 | -4.07 |
| IN | PARTNERS Nat'l HPs of IN | | | | | | | | | | | |
| | High Self | MC1 | 84.16 | 80.24 | 60.18 | 20.06 | -1.27 | 182.35 | 173.85 | 130.39 | 43.46 | -2.76 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 27

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-----------------------------|-----|----------|--------|--------|-------|--------|----------|--------|--------|--------|--------|
| IN | High Family | MC2 | 216.39 | 209.41 | 142.27 | 67.14 | -14.31 | 468.85 | 453.72 | 308.25 | 145.47 | -31.01 |
| | Physicians HP of N. Indiana | | | | | | | | | | | |
| | High Self | DQ1 | 88.57 | 89.77 | 65.96 | 23.81 | -1.93 | 191.90 | 194.50 | 142.91 | 51.59 | -4.18 |
| | High Family | DQ2 | 200.04 | 202.60 | 142.27 | 60.33 | -4.77 | 433.42 | 438.97 | 308.25 | 130.72 | -10.33 |
| IN | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | 2I1 | 71.05 | 74.87 | 56.15 | 18.72 | 0.96 | 153.94 | 162.22 | 121.67 | 40.55 | 2.07 |
| | High Family | 2I2 | 184.35 | 194.27 | 142.27 | 52.00 | 2.59 | 399.43 | 420.92 | 308.25 | 112.67 | 5.61 |
| IN | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | S31 | 62.00 | 72.09 | 54.07 | 18.02 | 2.52 | 134.33 | 156.20 | 117.15 | 39.05 | 5.47 |
| | High Family | S32 | 168.24 | 187.25 | 140.44 | 46.81 | 4.75 | 364.52 | 405.71 | 304.28 | 101.43 | 10.30 |
| IN | Rush Prudential HMO | | | | | | | | | | | |
| | High Self | 171 | 71.45 | 71.69 | 53.77 | 17.92 | 0.06 | 154.81 | 155.33 | 116.50 | 38.83 | 0.13 |
| | High Family | 172 | 171.90 | 172.47 | 129.35 | 43.12 | 0.15 | 372.45 | 373.69 | 280.27 | 93.42 | 0.31 |
| IN | The M*Plan | | | | | | | | | | | |
| | High Self | IN1 | 73.86 | 76.07 | 57.05 | 19.02 | 0.56 | 160.03 | 164.82 | 123.62 | 41.20 | 1.19 |
| | High Family | IN2 | 179.99 | 185.01 | 138.76 | 46.25 | 1.20 | 389.98 | 400.86 | 300.65 | 100.21 | 2.60 |
| IN | Welborn HMO | | | | | | | | | | | |
| | High Self | H31 | 90.21 | 82.45 | 61.84 | 20.61 | -6.77 | 195.46 | 178.64 | 133.98 | 44.66 | -14.67 |
| | High Family | H32 | 233.14 | 213.12 | 142.27 | 70.85 | -27.35 | 505.14 | 461.76 | 308.25 | 153.51 | -59.26 |
| IA | Care Choices | | | | | | | | | | | |
| | High Self | FA1 | 66.98 | 76.04 | 57.03 | 19.01 | 2.27 | 145.12 | 164.75 | 123.56 | 41.19 | 4.91 |
| | High Family | FA2 | 180.18 | 204.57 | 142.27 | 62.30 | 17.06 | 390.39 | 443.24 | 308.25 | 134.99 | 36.97 |
| IA | Exclusive Healthcare | | | | | | | | | | | |
| | High Self | 9Y1 | 62.63 | 71.24 | 53.43 | 17.81 | 2.15 | 135.70 | 154.35 | 115.76 | 38.59 | 4.67 |
| | High Family | 9Y2 | 174.50 | 192.43 | 142.27 | 50.16 | 6.54 | 378.08 | 416.93 | 308.25 | 108.68 | 14.16 |
| IA | Health Alliance HMO | | | | | | | | | | | |
| | High Self | 7X1 | New Area | 78.46 | 58.85 | 19.61 | N/A | New Area | 170.00 | 127.50 | 42.50 | N/A |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 28

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-------------------------------|-----|----------|--------|--------|-------|--------|----------|--------|--------|--------|--------|
| IA | High Family | 7X2 | New Area | 186.92 | 140.19 | 46.73 | N/A | New Area | 404.99 | 303.74 | 101.25 | N/A |
| | Heritage National Healthplan | | | | | | | | | | | |
| | High Self | 3J1 | 79.06 | 86.15 | 64.61 | 21.54 | 1.78 | 171.30 | 186.66 | 140.00 | 46.66 | 3.84 |
| | High Family | 3J2 | 175.00 | 191.55 | 142.27 | 49.28 | 5.53 | 379.17 | 415.03 | 308.25 | 106.78 | 11.99 |
| IA | John Deere Family Healthplan | | | | | | | | | | | |
| | High Self | 1J1 | 65.64 | 72.22 | 54.17 | 18.05 | 1.64 | 142.22 | 156.48 | 117.36 | 39.12 | 3.57 |
| | High Family | 1J2 | 155.06 | 170.59 | 127.94 | 42.65 | 3.89 | 335.96 | 369.61 | 277.21 | 92.40 | 8.41 |
| IA | Maxicare Illinois | | | | | | | | | | | |
| | High Self | FV1 | 82.31 | 80.64 | 60.48 | 20.16 | -0.42 | 178.34 | 174.72 | 131.04 | 43.68 | -0.90 |
| | High Family | FV2 | 201.70 | 197.60 | 142.27 | 55.33 | -11.43 | 437.02 | 428.13 | 308.25 | 119.88 | -24.77 |
| IA | Principal Health Care of Iowa | | | | | | | | | | | |
| | High Self | SV1 | 76.13 | 77.65 | 58.24 | 19.41 | 0.38 | 164.95 | 168.24 | 126.18 | 42.06 | 0.82 |
| | High Family | SV2 | 205.58 | 209.68 | 142.27 | 67.41 | -3.23 | 445.42 | 454.31 | 308.25 | 146.06 | -6.99 |
| IA | Principal Health Care of NE | | | | | | | | | | | |
| | High Self | GU1 | 76.03 | 68.70 | 51.53 | 17.17 | -1.84 | 164.73 | 148.85 | 111.64 | 37.21 | -3.97 |
| | High Family | GU2 | 205.30 | 185.48 | 139.11 | 46.37 | -23.99 | 444.82 | 401.87 | 301.40 | 100.47 | -51.98 |
| IA | SecureCare of Iowa | | | | | | | | | | | |
| | High Self | 3Q1 | 70.84 | 63.18 | 47.39 | 15.79 | -1.92 | 153.49 | 136.89 | 102.67 | 34.22 | -4.15 |
| | High Family | 3Q2 | 185.55 | 165.47 | 124.10 | 41.37 | -9.24 | 402.03 | 358.52 | 268.89 | 89.63 | -20.03 |
| IA | United HealthCare/Midlands | | | | | | | | | | | |
| | High Self | NF1 | 77.80 | 80.90 | 60.68 | 20.22 | 0.77 | 168.57 | 175.28 | 131.46 | 43.82 | 1.68 |
| | High Family | NF2 | 190.58 | 196.71 | 142.27 | 54.44 | -1.20 | 412.92 | 426.21 | 308.25 | 117.96 | -2.59 |
| KS | Exclusive Healthcare | | | | | | | | | | | |
| | High Self | 8K1 | New Plan | 65.12 | 48.84 | 16.28 | N/A | New Plan | 141.09 | 105.82 | 35.27 | N/A |
| | High Family | 8K2 | New Plan | 176.46 | 132.35 | 44.11 | N/A | New Plan | 382.33 | 286.75 | 95.58 | N/A |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 29

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-----------------------------|-----|--------|--------|--------|-------|-------|--------|--------|--------|--------|-------|
| KS | Humana Kansas City, Inc. | | | | | | | | | | | |
| | High Self | MS1 | 70.42 | 84.18 | 63.14 | 21.04 | 3.44 | 152.58 | 182.39 | 136.79 | 45.60 | 7.46 |
| | High Family | MS2 | 189.29 | 202.07 | 142.27 | 59.80 | 5.45 | 410.13 | 437.82 | 308.25 | 129.57 | 11.81 |
| | Standard Self | MS4 | 66.98 | 78.18 | 58.64 | 19.54 | 2.80 | 145.12 | 169.39 | 127.04 | 42.35 | 6.07 |
| | Standard Family | MS5 | 180.00 | 187.63 | 140.72 | 46.91 | 1.85 | 390.00 | 406.53 | 304.90 | 101.63 | 4.00 |
| KS | Kaiser Permanente | | | | | | | | | | | |
| | High Self | HA1 | 58.06 | 62.54 | 46.91 | 15.63 | 1.12 | 125.80 | 135.50 | 101.63 | 33.87 | 2.42 |
| | High Family | HA2 | 149.80 | 161.34 | 121.01 | 40.33 | 2.88 | 324.57 | 349.57 | 262.18 | 87.39 | 6.25 |
| KS | Preferred Plus of Kansas | | | | | | | | | | | |
| | High Self | VA1 | 83.99 | 87.72 | 65.79 | 21.93 | 0.77 | 181.98 | 190.06 | 142.55 | 47.51 | 1.66 |
| | High Family | VA2 | 225.14 | 235.20 | 142.27 | 92.93 | 2.73 | 487.80 | 509.60 | 308.25 | 201.35 | 5.92 |
| KS | Premier Blue | | | | | | | | | | | |
| | High Self | 5N1 | 83.66 | 87.76 | 65.82 | 21.94 | 1.03 | 181.26 | 190.15 | 142.61 | 47.54 | 2.23 |
| | High Family | 5N2 | 225.97 | 236.94 | 142.27 | 94.67 | 3.64 | 489.60 | 513.37 | 308.25 | 205.12 | 7.89 |
| KS | Principal Health Care of KC | | | | | | | | | | | |
| | High Self | 7W1 | 81.84 | 91.16 | 65.96 | 25.20 | 4.74 | 177.32 | 197.51 | 142.91 | 54.60 | 10.27 |
| | High Family | 7W2 | 204.60 | 227.88 | 142.27 | 85.61 | 15.95 | 443.30 | 493.74 | 308.25 | 185.49 | 34.56 |
| KS | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | 1K1 | 71.09 | 78.15 | 58.61 | 19.54 | 1.77 | 154.03 | 169.33 | 127.00 | 42.33 | 3.82 |
| | High Family | 1K2 | 183.26 | 201.45 | 142.27 | 59.18 | 10.86 | 397.06 | 436.48 | 308.25 | 128.23 | 23.54 |
| KS | United HealthCare MidWest | | | | | | | | | | | |
| | High Self | 4M1 | 79.71 | 89.75 | 65.96 | 23.79 | 3.86 | 172.71 | 194.46 | 142.91 | 51.55 | 8.37 |
| | High Family | 4M2 | 200.52 | 225.78 | 142.27 | 83.51 | 17.93 | 434.46 | 489.19 | 308.25 | 180.94 | 38.85 |
| KY | Advantage Care, Inc. | | | | | | | | | | | |
| | High Self | XW1 | 78.28 | 82.56 | 61.92 | 20.64 | 1.07 | 169.61 | 178.88 | 134.16 | 44.72 | 2.32 |
| | High Family | XW2 | 203.27 | 214.47 | 142.27 | 72.20 | 3.87 | 440.42 | 464.69 | 308.25 | 156.44 | 8.39 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 30

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-------------------------------|-----|--------|--------|--------|-------|--------|--------|--------|--------|--------|--------|
| KY | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | RD1 | 79.59 | 88.02 | 65.96 | 22.06 | 2.16 | 172.45 | 190.71 | 142.91 | 47.80 | 4.69 |
| | High Family | RD2 | 192.76 | 213.16 | 142.27 | 70.89 | 13.07 | 417.65 | 461.85 | 308.25 | 153.60 | 28.32 |
| KY | Bluegrass Family Health | | | | | | | | | | | |
| | High Self | 2B1 | 85.64 | 83.77 | 62.83 | 20.94 | -1.87 | 185.55 | 181.50 | 136.13 | 45.37 | -4.05 |
| | High Family | 2B2 | 202.88 | 198.45 | 142.27 | 56.18 | -11.76 | 439.57 | 429.98 | 308.25 | 121.73 | -25.47 |
| KY | Humana Care Plan | | | | | | | | | | | |
| | High Self | 181 | 79.38 | 85.53 | 64.15 | 21.38 | 1.54 | 171.99 | 185.32 | 138.99 | 46.33 | 3.33 |
| | High Family | 182 | 205.71 | 221.62 | 142.27 | 79.35 | 8.58 | 445.71 | 480.18 | 308.25 | 171.93 | 18.59 |
| KY | Humana Care Plan | | | | | | | | | | | |
| | High Self | HR1 | 70.81 | 72.29 | 54.22 | 18.07 | 0.37 | 153.42 | 156.63 | 117.47 | 39.16 | 0.81 |
| | High Family | HR2 | 201.14 | 205.32 | 142.27 | 63.05 | -3.15 | 435.80 | 444.86 | 308.25 | 136.61 | -6.82 |
| KY | Humana Health Plan | | | | | | | | | | | |
| | High Self | D21 | 82.96 | 86.77 | 65.08 | 21.69 | 0.95 | 179.75 | 188.00 | 141.00 | 47.00 | 2.06 |
| | High Family | D22 | 214.97 | 224.86 | 142.27 | 82.59 | 2.56 | 465.77 | 487.20 | 308.25 | 178.95 | 5.55 |
| KY | PacifiCare of Ohio, Inc. | | | | | | | | | | | |
| | High Self | R81 | 80.06 | 84.06 | 63.05 | 21.01 | 1.00 | 173.46 | 182.13 | 136.60 | 45.53 | 2.17 |
| | High Family | R82 | 189.01 | 198.46 | 142.27 | 56.19 | 2.12 | 409.52 | 430.00 | 308.25 | 121.75 | 4.60 |
| KY | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | S31 | 62.00 | 72.09 | 54.07 | 18.02 | 2.52 | 134.33 | 156.20 | 117.15 | 39.05 | 5.47 |
| | High Family | S32 | 168.24 | 187.25 | 140.44 | 46.81 | 4.75 | 364.52 | 405.71 | 304.28 | 101.43 | 10.30 |
| KY | United Health Care of Ohio | | | | | | | | | | | |
| | High Self | 3U1 | 85.22 | 90.57 | 65.96 | 24.61 | 2.22 | 184.64 | 196.24 | 142.91 | 53.33 | 4.82 |
| | High Family | 3U2 | 186.64 | 203.41 | 142.27 | 61.14 | 9.44 | 404.39 | 440.72 | 308.25 | 132.47 | 20.45 |
| KY | United HealthCare of Kentucky | | | | | | | | | | | |
| | High Self | DU1 | 89.18 | 92.22 | 65.96 | 26.26 | -0.09 | 193.22 | 199.81 | 142.91 | 56.90 | -0.19 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 31

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|--------------------------------|-----|--------|--------|--------|-------|--------|--------|--------|--------|--------|--------|
| LA | High Family | DU2 | 221.01 | 228.53 | 142.27 | 86.26 | 0.19 | 478.86 | 495.15 | 308.25 | 186.90 | 0.41 |
| | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | NG1 | 65.06 | 74.91 | 56.18 | 18.73 | 2.47 | 140.96 | 162.31 | 121.73 | 40.58 | 5.34 |
| | High Family | NG2 | 169.16 | 194.77 | 142.27 | 52.50 | 10.21 | 366.51 | 422.00 | 308.25 | 113.75 | 22.12 |
| LA | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | TK1 | 53.75 | 61.89 | 46.42 | 15.47 | 2.03 | 116.46 | 134.10 | 100.58 | 33.52 | 4.41 |
| | High Family | TK2 | 174.68 | 201.13 | 142.27 | 58.86 | 15.19 | 378.47 | 435.78 | 308.25 | 127.53 | 32.91 |
| LA | Gulf South Health Plan, Inc. | | | | | | | | | | | |
| | High Self | LY1 | 76.23 | 72.30 | 54.23 | 18.07 | -0.99 | 165.17 | 156.65 | 117.49 | 39.16 | -2.13 |
| | High Family | LY2 | 192.46 | 182.54 | 136.91 | 45.63 | -11.89 | 417.00 | 395.50 | 296.63 | 98.87 | -25.76 |
| LA | MEDFIRST | | | | | | | | | | | |
| | High Self | 2M1 | 74.07 | 77.03 | 57.77 | 19.26 | 0.74 | 160.49 | 166.90 | 125.18 | 41.72 | 1.60 |
| | High Family | 2M2 | 178.56 | 185.70 | 139.28 | 46.42 | 1.78 | 386.88 | 402.35 | 301.76 | 100.59 | 3.87 |
| LA | Ochsner Health Plan | | | | | | | | | | | |
| | High Self | 4Q1 | 72.29 | 69.97 | 52.48 | 17.49 | -0.58 | 156.63 | 151.60 | 113.70 | 37.90 | -1.26 |
| | High Family | 4Q2 | 195.18 | 188.92 | 141.69 | 47.23 | -13.01 | 422.89 | 409.33 | 307.00 | 102.33 | -28.19 |
| LA | Ochsner Health Plan | | | | | | | | | | | |
| | High Self | 4R1 | 76.14 | 65.48 | 49.11 | 16.37 | -2.66 | 164.97 | 141.87 | 106.40 | 35.47 | -5.77 |
| | High Family | 4R2 | 206.26 | 176.80 | 132.60 | 44.20 | -27.12 | 446.90 | 383.07 | 287.30 | 95.77 | -58.76 |
| LA | Ochsner Health Plan | | | | | | | | | | | |
| | High Self | 4S1 | 72.29 | 65.84 | 49.38 | 16.46 | -1.61 | 156.63 | 142.65 | 106.99 | 35.66 | -3.50 |
| | High Family | 4S2 | 194.70 | 177.79 | 133.34 | 44.45 | -15.31 | 421.85 | 385.21 | 288.91 | 96.30 | -33.18 |
| LA | Ochsner Health Plan | | | | | | | | | | | |
| | High Self | 4W1 | 64.10 | 63.82 | 47.87 | 15.95 | -0.07 | 138.88 | 138.28 | 103.71 | 34.57 | -0.15 |
| | High Family | 4W2 | 172.53 | 172.34 | 129.26 | 43.08 | -0.05 | 373.82 | 373.40 | 280.05 | 93.35 | -0.10 |
| LA | United HealthCare of Louisiana | | | | | | | | | | | |
| | High Self | RY1 | 75.64 | 81.08 | 60.81 | 20.27 | 1.36 | 163.89 | 175.67 | 131.75 | 43.92 | 2.95 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 32

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-----------------------------|-----|----------|--------|--------|-------|--------|----------|--------|--------|--------|--------|
| LA | High Family | RY2 | 204.24 | 211.86 | 142.27 | 69.59 | 0.29 | 442.52 | 459.03 | 308.25 | 150.78 | 0.63 |
| | Vantage Health Plan | | | | | | | | | | | |
| | High Self | 7V1 | New Plan | 82.63 | 61.97 | 20.66 | N/A | New Plan | 179.03 | 134.27 | 44.76 | N/A |
| | High Family | 7V2 | New Plan | 209.13 | 142.27 | 66.86 | N/A | New Plan | 453.12 | 308.25 | 144.87 | N/A |
| ME | HMO MAINE | | | | | | | | | | | |
| | High Self | CU1 | 91.32 | 88.63 | 65.96 | 22.67 | -5.82 | 197.86 | 192.03 | 142.91 | 49.12 | -12.61 |
| | High Family | CU2 | 203.63 | 197.63 | 142.27 | 55.36 | -13.33 | 441.20 | 428.20 | 308.25 | 119.95 | -28.88 |
| MD | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | V81 | 79.84 | 95.51 | 65.96 | 29.55 | 9.59 | 172.99 | 206.94 | 142.91 | 64.03 | 20.78 |
| | High Family | V82 | 175.38 | 233.42 | 142.27 | 91.15 | 47.31 | 379.99 | 505.74 | 308.25 | 197.49 | 102.49 |
| MD | CapitalCare | | | | | | | | | | | |
| | High Self | 2G1 | 64.63 | 73.48 | 55.11 | 18.37 | 2.21 | 140.03 | 159.21 | 119.41 | 39.80 | 4.79 |
| | High Family | 2G2 | 177.73 | 202.07 | 142.27 | 59.80 | 15.37 | 385.08 | 437.82 | 308.25 | 129.57 | 33.30 |
| MD | CareFirst | | | | | | | | | | | |
| | High Self | JQ1 | 87.91 | 95.79 | 65.96 | 29.83 | 4.75 | 190.47 | 207.55 | 142.91 | 64.64 | 10.30 |
| | High Family | JQ2 | 194.03 | 219.23 | 142.27 | 76.96 | 17.87 | 420.40 | 475.00 | 308.25 | 166.75 | 38.72 |
| MD | CIGNA HlthCare Mid-Atlantic | | | | | | | | | | | |
| | High Self | XF1 | 77.81 | 57.76 | 43.32 | 14.44 | -5.01 | 168.59 | 125.15 | 93.86 | 31.29 | -10.86 |
| | High Family | XF2 | 210.17 | 163.92 | 122.94 | 40.98 | -34.25 | 455.37 | 355.16 | 266.37 | 88.79 | -74.21 |
| MD | George Washington Univ HP | | | | | | | | | | | |
| | High Self | E51 | 94.91 | 104.49 | 65.96 | 38.53 | 6.45 | 205.64 | 226.40 | 142.91 | 83.49 | 13.98 |
| | High Family | E52 | 204.81 | 228.80 | 142.27 | 86.53 | 16.66 | 443.76 | 495.73 | 308.25 | 187.48 | 36.09 |
| | Standard Self | E54 | 63.09 | 68.26 | 51.20 | 17.06 | 1.29 | 136.70 | 147.90 | 110.93 | 36.97 | 2.80 |
| | Standard Family | E55 | 135.04 | 148.80 | 111.60 | 37.20 | 3.44 | 292.59 | 322.40 | 241.80 | 80.60 | 7.45 |
| MD | Kaiser Permanente | | | | | | | | | | | |
| | High Self | E31 | 71.51 | 79.05 | 59.29 | 19.76 | 1.88 | 154.94 | 171.28 | 128.46 | 42.82 | 4.09 |
| | High Family | E32 | 176.44 | 195.22 | 142.27 | 52.95 | 8.84 | 382.29 | 422.98 | 308.25 | 114.73 | 19.16 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|--------|--------|--------|--------|-------|--------|--------|--------|--------|-------|
| MD | MD-IPA | | | | | | | | | | | |
| | High Self | JP1 | 73.64 | 79.09 | 59.32 | 19.77 | 1.36 | 159.55 | 171.36 | 128.52 | 42.84 | 2.95 |
| | High Family | JP2 | 176.75 | 189.82 | 142.27 | 47.55 | 3.36 | 382.96 | 411.28 | 308.25 | 103.03 | 7.29 |
| MD | NYLCare/Mid-Atlantic | | | | | | | | | | | |
| | High Self | JN1 | 74.08 | 90.06 | 65.96 | 24.10 | 5.58 | 160.51 | 195.13 | 142.91 | 52.22 | 12.09 |
| | High Family | JN2 | 174.08 | 211.65 | 142.27 | 69.38 | 25.86 | 377.17 | 458.58 | 308.25 | 150.33 | 56.04 |
| | Standard Self | JN4 | 55.16 | 61.36 | 46.02 | 15.34 | 1.55 | 119.51 | 132.95 | 99.71 | 33.24 | 3.36 |
| | Standard Family | JN5 | 129.62 | 144.19 | 108.14 | 36.05 | 3.65 | 280.84 | 312.41 | 234.31 | 78.10 | 7.89 |
| MA | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | NE1 | 89.51 | 97.57 | 65.96 | 31.61 | 4.93 | 193.94 | 211.40 | 142.91 | 68.49 | 10.68 |
| | High Family | NE2 | 241.48 | 263.21 | 142.27 | 120.94 | 14.40 | 523.21 | 570.29 | 308.25 | 262.04 | 31.20 |
| MA | CHP/Kaiser Permanente | | | | | | | | | | | |
| | High Self | K11 | 78.72 | 79.92 | 59.94 | 19.98 | 0.30 | 170.56 | 173.16 | 129.87 | 43.29 | 0.65 |
| | High Family | K12 | 180.46 | 207.81 | 142.27 | 65.54 | 20.02 | 391.00 | 450.26 | 308.25 | 142.01 | 43.38 |
| MA | Fallon Community Health Plan | | | | | | | | | | | |
| | High Self | JV1 | 71.32 | 76.16 | 57.12 | 19.04 | 1.21 | 154.53 | 165.01 | 123.76 | 41.25 | 2.62 |
| | High Family | JV2 | 185.99 | 197.02 | 142.27 | 54.75 | 3.70 | 402.98 | 426.88 | 308.25 | 118.63 | 8.02 |
| MA | Harvard Community Hlth Plan | | | | | | | | | | | |
| | High Self | 681 | 92.01 | 102.28 | 65.96 | 36.32 | 7.14 | 199.36 | 221.61 | 142.91 | 78.70 | 15.47 |
| | High Family | 682 | 243.85 | 271.04 | 142.27 | 128.77 | 19.86 | 528.34 | 587.25 | 308.25 | 279.00 | 43.03 |
| MA | Harvard Pilgrim Hlth Care-NE | | | | | | | | | | | |
| | High Self | 701 | 71.23 | 68.50 | 51.38 | 17.12 | -0.69 | 154.33 | 148.42 | 111.32 | 37.10 | -1.48 |
| | High Family | 702 | 170.97 | 164.37 | 123.28 | 41.09 | -1.65 | 370.44 | 356.14 | 267.11 | 89.03 | -3.58 |
| MA | Health New England | | | | | | | | | | | |
| | High Self | DJ1 | 82.47 | 94.56 | 65.96 | 28.60 | 7.98 | 178.69 | 204.88 | 142.91 | 61.97 | 17.30 |
| | High Family | DJ2 | 182.26 | 208.97 | 142.27 | 66.70 | 19.38 | 394.90 | 452.77 | 308.25 | 144.52 | 41.99 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 34

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-------------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| MA | Matthew Thornton Health Plan | | | | | | | | | | | |
| | High Self | NX1 | 90.81 | 97.48 | 65.96 | 31.52 | 3.54 | 196.76 | 211.21 | 142.91 | 68.30 | 7.67 |
| | High Family | NX2 | 241.08 | 258.97 | 142.27 | 116.70 | 10.56 | 522.34 | 561.10 | 308.25 | 252.85 | 22.88 |
| MI | Blue Care Network - East MI | | | | | | | | | | | |
| | High Self | K51 | 83.95 | 80.89 | 60.67 | 20.22 | -0.90 | 181.89 | 175.26 | 131.45 | 43.81 | -1.95 |
| | High Family | K52 | 209.90 | 202.25 | 142.27 | 59.98 | -14.98 | 454.78 | 438.21 | 308.25 | 129.96 | -32.45 |
| MI | Blue Care Network - East MI | | | | | | | | | | | |
| | High Self | KN1 | 74.71 | 72.48 | 54.36 | 18.12 | -0.56 | 161.87 | 157.04 | 117.78 | 39.26 | -1.21 |
| | High Family | KN2 | 224.16 | 217.44 | 142.27 | 75.17 | -14.05 | 485.68 | 471.12 | 308.25 | 162.87 | -30.44 |
| MI | Blue Care Network Health Cntr | | | | | | | | | | | |
| | High Self | LN1 | 89.66 | 93.11 | 65.96 | 27.15 | 0.32 | 194.26 | 201.74 | 142.91 | 58.83 | 0.70 |
| | High Family | LN2 | 215.87 | 223.22 | 142.27 | 80.95 | 0.02 | 467.72 | 483.64 | 308.25 | 175.39 | 0.04 |
| MI | Blue Care Network SE | | | | | | | | | | | |
| | High Self | LX1 | 56.72 | 58.08 | 43.56 | 14.52 | 0.34 | 122.89 | 125.84 | 94.38 | 31.46 | 0.74 |
| | High Family | LX2 | 188.91 | 193.45 | 142.27 | 51.18 | -2.79 | 409.31 | 419.14 | 308.25 | 110.89 | -6.05 |
| MI | Blue Care Network-Grt Lakes | | | | | | | | | | | |
| | High Self | G71 | 84.44 | 87.03 | 65.27 | 21.76 | 0.15 | 182.95 | 188.57 | 141.43 | 47.14 | 0.32 |
| | High Family | G72 | 214.00 | 220.58 | 142.27 | 78.31 | -0.75 | 463.67 | 477.92 | 308.25 | 169.67 | -1.63 |
| MI | Blue Care Network-Grt Lakes | | | | | | | | | | | |
| | High Self | KF1 | 66.76 | 68.80 | 51.60 | 17.20 | 0.51 | 144.65 | 149.07 | 111.80 | 37.27 | 1.11 |
| | High Family | KF2 | 184.55 | 190.21 | 142.27 | 47.94 | -1.67 | 399.86 | 412.12 | 308.25 | 103.87 | -3.62 |
| MI | Blue Care Network-Grt Lakes | | | | | | | | | | | |
| | High Self | KR1 | 66.73 | 68.70 | 51.53 | 17.17 | 0.49 | 144.58 | 148.85 | 111.64 | 37.21 | 1.07 |
| | High Family | KR2 | 193.72 | 199.49 | 142.27 | 57.22 | -1.56 | 419.73 | 432.23 | 308.25 | 123.98 | -3.38 |
| MI | Care Choices | | | | | | | | | | | |
| | High Self | BA1 | 63.53 | 72.63 | 54.47 | 18.16 | 2.28 | 137.65 | 157.37 | 118.03 | 39.34 | 4.93 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 35

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|--------------------------|-----|--------|--------|--------|-------|--------|--------|--------|--------|--------|--------|
| MI | High Family | BA2 | 172.63 | 197.38 | 142.27 | 55.11 | 11.95 | 374.03 | 427.66 | 308.25 | 119.41 | 25.90 |
| | Care Choices | | | | | | | | | | | |
| | High Self | KZ1 | 78.88 | 81.30 | 60.98 | 20.32 | 0.60 | 170.91 | 176.15 | 132.11 | 44.04 | 1.31 |
| | High Family | KZ2 | 204.93 | 211.20 | 142.27 | 68.93 | -1.06 | 444.02 | 457.60 | 308.25 | 149.35 | -2.30 |
| MI | Grand Valley Health Plan | | | | | | | | | | | |
| | High Self | RL1 | 78.53 | 83.14 | 62.36 | 20.78 | 1.15 | 170.15 | 180.14 | 135.11 | 45.03 | 2.49 |
| | High Family | RL2 | 198.75 | 211.22 | 142.27 | 68.95 | 5.14 | 430.63 | 457.64 | 308.25 | 149.39 | 11.13 |
| MI | Health Alliance | | | | | | | | | | | |
| | High Self | 521 | 73.32 | 79.21 | 59.41 | 19.80 | 1.47 | 158.86 | 171.62 | 128.72 | 42.90 | 3.19 |
| | High Family | 522 | 194.22 | 209.90 | 142.27 | 67.63 | 8.35 | 420.81 | 454.78 | 308.25 | 146.53 | 18.09 |
| MI | HealthPlus MI | | | | | | | | | | | |
| | High Self | X51 | 87.02 | 94.24 | 65.96 | 28.28 | 4.09 | 188.54 | 204.19 | 142.91 | 61.28 | 8.87 |
| | High Family | X52 | 213.54 | 231.03 | 142.27 | 88.76 | 10.16 | 462.67 | 500.57 | 308.25 | 192.32 | 22.02 |
| MI | M-Care | | | | | | | | | | | |
| | High Self | EG1 | 80.48 | 83.45 | 62.59 | 20.86 | 0.74 | 174.37 | 180.81 | 135.61 | 45.20 | 1.61 |
| | High Family | EG2 | 201.20 | 208.63 | 142.27 | 66.36 | 0.10 | 435.93 | 452.03 | 308.25 | 143.78 | 0.22 |
| MI | Medical Value Plan | | | | | | | | | | | |
| | High Self | EV1 | 77.31 | 77.39 | 58.04 | 19.35 | 0.02 | 167.51 | 167.68 | 125.76 | 41.92 | 0.04 |
| | High Family | EV2 | 204.12 | 204.30 | 142.27 | 62.03 | -7.15 | 442.26 | 442.65 | 308.25 | 134.40 | -15.49 |
| MI | OmniCare | | | | | | | | | | | |
| | High Self | KA1 | 78.92 | 79.14 | 59.36 | 19.78 | 0.05 | 170.99 | 171.47 | 128.60 | 42.87 | 0.12 |
| | High Family | KA2 | 197.27 | 197.87 | 142.27 | 55.60 | -6.73 | 427.42 | 428.72 | 308.25 | 120.47 | -14.58 |
| MI | Physicians Health Plan | | | | | | | | | | | |
| | High Self | U51 | 93.27 | 87.99 | 65.96 | 22.03 | -8.41 | 202.09 | 190.65 | 142.91 | 47.74 | -18.22 |
| | High Family | U52 | 223.83 | 211.19 | 142.27 | 68.92 | -19.97 | 484.97 | 457.58 | 308.25 | 149.33 | -43.27 |
| MI | Physicians Health Plan | | | | | | | | | | | |
| | High Self | U61 | 83.22 | 108.90 | 65.96 | 42.94 | 22.14 | 180.31 | 235.95 | 142.91 | 93.04 | 47.96 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| MI | High Family | U62 | 199.71 | 261.35 | 142.27 | 119.08 | 54.31 | 432.71 | 566.26 | 308.25 | 258.01 | 117.67 |
| | Physicians Health Plan | | | | | | | | | | | |
| | High Self | U71 | 80.30 | 101.16 | 65.96 | 35.20 | 15.13 | 173.98 | 219.18 | 142.91 | 76.27 | 32.78 |
| | High Family | U72 | 192.69 | 242.79 | 142.27 | 100.52 | 42.77 | 417.50 | 526.05 | 308.25 | 217.80 | 92.67 |
| MI | Physicians Health Plan | | | | | | | | | | | |
| | High Self | U81 | 74.70 | 89.69 | 65.96 | 23.73 | 5.06 | 161.85 | 194.33 | 142.91 | 51.42 | 10.96 |
| | High Family | U82 | 179.26 | 215.24 | 142.27 | 72.97 | 28.16 | 388.40 | 466.35 | 308.25 | 158.10 | 61.00 |
| MI | Priority Health | | | | | | | | | | | |
| | High Self | BQ1 | 72.37 | 73.75 | 55.31 | 18.44 | 0.35 | 156.80 | 159.79 | 119.84 | 39.95 | 0.75 |
| | High Family | BQ2 | 204.51 | 208.36 | 142.27 | 66.09 | -3.48 | 443.11 | 451.45 | 308.25 | 143.20 | -7.54 |
| MI | SelectCare | | | | | | | | | | | |
| | High Self | K61 | 69.00 | 63.74 | 47.81 | 15.93 | -1.32 | 149.50 | 138.10 | 103.58 | 34.52 | -2.85 |
| | High Family | K62 | 182.89 | 168.95 | 126.71 | 42.24 | -5.71 | 396.26 | 366.06 | 274.55 | 91.51 | -12.38 |
| MI | The Wellness Plan | | | | | | | | | | | |
| | High Self | K31 | 73.50 | 69.09 | 51.82 | 17.27 | -1.10 | 159.25 | 149.70 | 112.28 | 37.42 | -2.39 |
| | High Family | K32 | 200.61 | 188.62 | 141.47 | 47.15 | -18.52 | 434.66 | 408.68 | 306.51 | 102.17 | -40.12 |
| MI | Total Health Care | | | | | | | | | | | |
| | High Self | N21 | 75.86 | 71.84 | 53.88 | 17.96 | -1.00 | 164.36 | 155.65 | 116.74 | 38.91 | -2.18 |
| | High Family | N22 | 185.85 | 176.32 | 132.24 | 44.08 | -6.83 | 402.68 | 382.03 | 286.52 | 95.51 | -14.80 |
| MN | Altru Health Plan | | | | | | | | | | | |
| | High Self | 2R1 | 73.84 | 64.16 | 48.12 | 16.04 | -2.42 | 159.99 | 139.01 | 104.26 | 34.75 | -5.25 |
| | High Family | 2R2 | 212.09 | 184.69 | 138.52 | 46.17 | -30.98 | 459.53 | 400.16 | 300.12 | 100.04 | -67.12 |
| MN | HealthPartners Classic | | | | | | | | | | | |
| | High Self | 531 | 70.25 | 75.82 | 56.87 | 18.95 | 1.39 | 152.21 | 164.28 | 123.21 | 41.07 | 3.02 |
| | High Family | 532 | 193.19 | 201.30 | 142.27 | 59.03 | 0.78 | 418.58 | 436.15 | 308.25 | 127.90 | 1.69 |
| | Standard Self | 534 | 55.10 | 60.91 | 45.68 | 15.23 | 1.46 | 119.38 | 131.97 | 98.98 | 32.99 | 3.15 |
| | Standard Family | 535 | 151.50 | 161.68 | 121.26 | 40.42 | 2.55 | 328.25 | 350.31 | 262.73 | 87.58 | 5.52 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 37

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|----------|--------|--------|--------|-------|----------|--------|--------|--------|--------|
| MN | HealthPartners Health Plan | | | | | | | | | | | |
| | High Self | HQ1 | 82.50 | 84.69 | 63.52 | 21.17 | 0.55 | 178.75 | 183.50 | 137.63 | 45.87 | 1.18 |
| | High Family | HQ2 | 206.26 | 211.72 | 142.27 | 69.45 | -1.87 | 446.90 | 458.73 | 308.25 | 150.48 | -4.05 |
| MN | Medica Primary | | | | | | | | | | | |
| | High Self | 111 | 67.88 | 84.08 | 63.06 | 21.02 | 4.05 | 147.07 | 182.17 | 136.63 | 45.54 | 8.77 |
| | High Family | 112 | 167.65 | 207.65 | 142.27 | 65.38 | 23.47 | 363.24 | 449.91 | 308.25 | 141.66 | 50.85 |
| MS | PrimeHealth of Alabama, Inc. | | | | | | | | | | | |
| | High Self | AA1 | 98.09 | 106.53 | 65.96 | 40.57 | 5.31 | 212.53 | 230.82 | 142.91 | 87.91 | 11.51 |
| | High Family | AA2 | 191.03 | 207.47 | 142.27 | 65.20 | 9.11 | 413.90 | 449.52 | 308.25 | 141.27 | 19.74 |
| MS | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | UB1 | 59.17 | 59.85 | 44.89 | 14.96 | 0.17 | 128.20 | 129.68 | 97.26 | 32.42 | 0.37 |
| | High Family | UB2 | 180.43 | 182.52 | 136.89 | 45.63 | 0.14 | 390.93 | 395.46 | 296.60 | 98.86 | 0.30 |
| MS | United HealthCare of MS | | | | | | | | | | | |
| | High Self | QV1 | 82.11 | 82.07 | 61.55 | 20.52 | -0.01 | 177.91 | 177.82 | 133.37 | 44.45 | -0.03 |
| | High Family | QV2 | 206.89 | 206.78 | 142.27 | 64.51 | -7.44 | 448.26 | 448.02 | 308.25 | 139.77 | -16.12 |
| MO | BlueCHOICE | | | | | | | | | | | |
| | High Self | 9G1 | 79.76 | 91.10 | 65.96 | 25.14 | 5.20 | 172.81 | 197.38 | 142.91 | 54.47 | 11.27 |
| | High Family | 9G2 | 172.69 | 197.26 | 142.27 | 54.99 | 11.82 | 374.16 | 427.40 | 308.25 | 119.15 | 25.61 |
| MO | Exclusive Healthcare | | | | | | | | | | | |
| | High Self | 8K1 | New Plan | 65.12 | 48.84 | 16.28 | N/A | New Plan | 141.09 | 105.82 | 35.27 | N/A |
| | High Family | 8K2 | New Plan | 176.46 | 132.35 | 44.11 | N/A | New Plan | 382.33 | 286.75 | 95.58 | N/A |
| MO | Group Health Plan | | | | | | | | | | | |
| | High Self | MM1 | 73.38 | 99.63 | 65.96 | 33.67 | 15.33 | 158.99 | 215.87 | 142.91 | 72.96 | 33.21 |
| | High Family | MM2 | 183.47 | 249.06 | 142.27 | 106.79 | 58.26 | 397.52 | 539.63 | 308.25 | 231.38 | 126.23 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 38

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|----------------------------|-----|----------|--------|--------|-------|--------|----------|--------|--------|--------|--------|
| MO | Humana Kansas City, Inc. | | | | | | | | | | | |
| | High Self | 7S1 | 47.17 | 68.36 | 51.27 | 17.09 | 5.30 | 102.20 | 148.11 | 111.08 | 37.03 | 11.48 |
| | High Family | 7S2 | 126.76 | 183.75 | 137.81 | 45.94 | 14.25 | 274.65 | 398.13 | 298.60 | 99.53 | 30.87 |
| | Standard Self | 7S4 | 44.22 | 63.21 | 47.41 | 15.80 | 4.75 | 95.81 | 136.96 | 102.72 | 34.24 | 10.29 |
| | Standard Family | 7S5 | 118.78 | 169.92 | 127.44 | 42.48 | 12.79 | 257.36 | 368.16 | 276.12 | 92.04 | 27.70 |
| MO | Humana Kansas City, Inc. | | | | | | | | | | | |
| | High Self | MS1 | 70.42 | 84.18 | 63.14 | 21.04 | 3.44 | 152.58 | 182.39 | 136.79 | 45.60 | 7.46 |
| | High Family | MS2 | 189.29 | 202.07 | 142.27 | 59.80 | 5.45 | 410.13 | 437.82 | 308.25 | 129.57 | 11.81 |
| | Standard Self | MS4 | 66.98 | 78.18 | 58.64 | 19.54 | 2.80 | 145.12 | 169.39 | 127.04 | 42.35 | 6.07 |
| | Standard Family | MS5 | 180.00 | 187.63 | 140.72 | 46.91 | 1.85 | 390.00 | 406.53 | 304.90 | 101.63 | 4.00 |
| MO | Kaiser Permanente | | | | | | | | | | | |
| | High Self | HA1 | 58.06 | 62.54 | 46.91 | 15.63 | 1.12 | 125.80 | 135.50 | 101.63 | 33.87 | 2.42 |
| | High Family | HA2 | 149.80 | 161.34 | 121.01 | 40.33 | 2.88 | 324.57 | 349.57 | 262.18 | 87.39 | 6.25 |
| MO | Mercy Health Plans/Premier | | | | | | | | | | | |
| | High Self | 7M1 | New Plan | 88.02 | 65.96 | 22.06 | N/A | New Plan | 190.71 | 142.91 | 47.80 | N/A |
| | High Family | 7M2 | New Plan | 204.72 | 142.27 | 62.45 | N/A | New Plan | 443.56 | 308.25 | 135.31 | N/A |
| MO | PARTNERS HMO | | | | | | | | | | | |
| | High Self | RN1 | 85.23 | 83.46 | 62.60 | 20.86 | -1.54 | 184.67 | 180.83 | 135.62 | 45.21 | -3.33 |
| | High Family | RN2 | 183.24 | 181.33 | 136.00 | 45.33 | -2.97 | 397.02 | 392.88 | 294.66 | 98.22 | -6.43 |
| MO | Principal St.Louis | | | | | | | | | | | |
| | High Self | 121 | 88.78 | 86.27 | 64.70 | 21.57 | -4.38 | 192.36 | 186.92 | 140.19 | 46.73 | -9.50 |
| | High Family | 122 | 193.55 | 188.07 | 141.05 | 47.02 | -11.59 | 419.36 | 407.49 | 305.62 | 101.87 | -25.12 |
| MO | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | 1K1 | 71.09 | 78.15 | 58.61 | 19.54 | 1.77 | 154.03 | 169.33 | 127.00 | 42.33 | 3.82 |
| | High Family | 1K2 | 183.26 | 201.45 | 142.27 | 59.18 | 10.86 | 397.06 | 436.48 | 308.25 | 128.23 | 23.54 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 39

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|--------|--------|--------|-------|--------|--------|--------|--------|--------|--------|
| MO | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | VZ1 | 73.34 | 68.72 | 51.54 | 17.18 | -1.15 | 158.90 | 148.89 | 111.67 | 37.22 | -2.50 |
| | High Family | VZ2 | 185.29 | 173.62 | 130.22 | 43.40 | -6.95 | 401.46 | 376.18 | 282.14 | 94.04 | -15.05 |
| MO | United HealthCare Choice | | | | | | | | | | | |
| | High Self | VB1 | 85.71 | 91.26 | 65.96 | 25.30 | 2.42 | 185.71 | 197.73 | 142.91 | 54.82 | 5.24 |
| | High Family | VB2 | 195.33 | 207.98 | 142.27 | 65.71 | 5.32 | 423.22 | 450.62 | 308.25 | 142.37 | 11.52 |
| MO | United HealthCare MidWest | | | | | | | | | | | |
| | High Self | 4M1 | 79.71 | 89.75 | 65.96 | 23.79 | 3.86 | 172.71 | 194.46 | 142.91 | 51.55 | 8.37 |
| | High Family | 4M2 | 200.52 | 225.78 | 142.27 | 83.51 | 17.93 | 434.46 | 489.19 | 308.25 | 180.94 | 38.85 |
| MO | United HealthCare Select | | | | | | | | | | | |
| | High Self | H81 | 70.98 | 88.32 | 65.96 | 22.36 | 4.62 | 153.79 | 191.36 | 142.91 | 48.45 | 10.00 |
| | High Family | H82 | 163.32 | 203.21 | 142.27 | 60.94 | 20.11 | 353.86 | 440.29 | 308.25 | 132.04 | 43.58 |
| MT | Yellowstone Community Health | | | | | | | | | | | |
| | High Self | 2Y1 | 68.37 | 68.10 | 51.08 | 17.02 | -0.07 | 148.14 | 147.55 | 110.66 | 36.89 | -0.14 |
| | High Family | 2Y2 | 177.35 | 176.65 | 132.49 | 44.16 | -0.18 | 384.26 | 382.74 | 287.06 | 95.68 | -0.38 |
| NE | Care Choices | | | | | | | | | | | |
| | High Self | FA1 | 66.98 | 76.04 | 57.03 | 19.01 | 2.27 | 145.12 | 164.75 | 123.56 | 41.19 | 4.91 |
| | High Family | FA2 | 180.18 | 204.57 | 142.27 | 62.30 | 17.06 | 390.39 | 443.24 | 308.25 | 134.99 | 36.97 |
| NE | Exclusive Healthcare | | | | | | | | | | | |
| | High Self | 9Y1 | 62.63 | 71.24 | 53.43 | 17.81 | 2.15 | 135.70 | 154.35 | 115.76 | 38.59 | 4.67 |
| | High Family | 9Y2 | 174.50 | 192.43 | 142.27 | 50.16 | 6.54 | 378.08 | 416.93 | 308.25 | 108.68 | 14.16 |
| NE | Principal Health Care of NE | | | | | | | | | | | |
| | High Self | GU1 | 76.03 | 68.70 | 51.53 | 17.17 | -1.84 | 164.73 | 148.85 | 111.64 | 37.21 | -3.97 |
| | High Family | GU2 | 205.30 | 185.48 | 139.11 | 46.37 | -23.99 | 444.82 | 401.87 | 301.40 | 100.47 | -51.98 |
| NE | United HealthCare/Midlands | | | | | | | | | | | |
| | High Self | NF1 | 77.80 | 80.90 | 60.68 | 20.22 | 0.77 | 168.57 | 175.28 | 131.46 | 43.82 | 1.68 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 40

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|----------|--------|--------|--------|---------|----------|--------|--------|--------|---------|
| NV | High Family | NF2 | 190.58 | 196.71 | 142.27 | 54.44 | -1.20 | 412.92 | 426.21 | 308.25 | 117.96 | -2.59 |
| | Exclusive Healthcare | | | | | | | | | | | |
| | High Self | 7E1 | New Plan | 67.18 | 50.39 | 16.79 | N/A | New Plan | 145.56 | 109.17 | 36.39 | N/A |
| | High Family | 7E2 | New Plan | 182.04 | 136.53 | 45.51 | N/A | New Plan | 394.42 | 295.82 | 98.60 | N/A |
| NV | Hometown Health Plan | | | | | | | | | | | |
| | High Self | 4H1 | 69.78 | 74.01 | 55.51 | 18.50 | 1.06 | 151.19 | 160.36 | 120.27 | 40.09 | 2.29 |
| | High Family | 4H2 | 166.41 | 176.47 | 132.35 | 44.12 | 2.52 | 360.56 | 382.35 | 286.76 | 95.59 | 5.45 |
| NV | Humana Health Plan, Inc. | | | | | | | | | | | |
| | High Self | TL1 | 67.70 | 63.32 | 47.49 | 15.83 | -1.09 | 146.68 | 137.19 | 102.89 | 34.30 | -2.37 |
| | High Family | TL2 | 194.84 | 182.23 | 136.67 | 45.56 | -14.34 | 422.15 | 394.83 | 296.12 | 98.71 | -31.07 |
| NV | PacifiCare of Nevada | | | | | | | | | | | |
| | High Self | K91 | 70.32 | 62.72 | 47.04 | 15.68 | -1.90 | 152.36 | 135.89 | 101.92 | 33.97 | -4.12 |
| | High Family | K92 | 178.36 | 158.81 | 119.11 | 39.70 | -4.89 | 386.45 | 344.09 | 258.07 | 86.02 | -10.59 |
| NH | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | UJ1 | 117.17 | 86.29 | 64.72 | 21.57 | -32.77 | 253.87 | 186.96 | 140.22 | 46.74 | -71.00 |
| | High Family | UJ2 | 329.32 | 230.65 | 142.27 | 88.38 | -106.00 | 713.53 | 499.74 | 308.25 | 191.49 | -229.67 |
| NH | CHP/Kaiser Permanente | | | | | | | | | | | |
| | High Self | K11 | 78.72 | 79.92 | 59.94 | 19.98 | 0.30 | 170.56 | 173.16 | 129.87 | 43.29 | 0.65 |
| | High Family | K12 | 180.46 | 207.81 | 142.27 | 65.54 | 20.02 | 391.00 | 450.26 | 308.25 | 142.01 | 43.38 |
| NH | Harvard Community Hlth Plan | | | | | | | | | | | |
| | High Self | 681 | 92.01 | 102.28 | 65.96 | 36.32 | 7.14 | 199.36 | 221.61 | 142.91 | 78.70 | 15.47 |
| | High Family | 682 | 243.85 | 271.04 | 142.27 | 128.77 | 19.86 | 528.34 | 587.25 | 308.25 | 279.00 | 43.03 |
| NH | Matthew Thornton Health Plan | | | | | | | | | | | |
| | High Self | NX1 | 90.81 | 97.48 | 65.96 | 31.52 | 3.54 | 196.76 | 211.21 | 142.91 | 68.30 | 7.67 |
| | High Family | NX2 | 241.08 | 258.97 | 142.27 | 116.70 | 10.56 | 522.34 | 561.10 | 308.25 | 252.85 | 22.88 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 41

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|---------|
| NJ | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | P31 | 114.88 | 123.26 | 65.96 | 57.30 | 5.25 | 248.91 | 267.06 | 142.91 | 124.15 | 11.37 |
| | High Family | P32 | 285.55 | 306.39 | 142.27 | 164.12 | 13.51 | 618.69 | 663.85 | 308.25 | 355.60 | 29.28 |
| | Standard Self | P34 | 74.46 | 81.16 | 60.87 | 20.29 | 1.68 | 161.33 | 175.85 | 131.89 | 43.96 | 3.63 |
| | Standard Family | P35 | 194.91 | 212.45 | 142.27 | 70.18 | 10.21 | 422.31 | 460.31 | 308.25 | 152.06 | 22.12 |
| NJ | AmeriHealth HMO, Inc. | | | | | | | | | | | |
| | High Self | FK1 | 90.84 | 99.11 | 65.96 | 33.15 | 5.14 | 196.82 | 214.74 | 142.91 | 71.83 | 11.14 |
| | High Family | FK2 | 233.79 | 253.44 | 142.27 | 111.17 | 12.32 | 506.55 | 549.12 | 308.25 | 240.87 | 26.69 |
| NJ | CIGNA CoMED HealthCare | | | | | | | | | | | |
| | High Self | P41 | 100.03 | 102.52 | 65.96 | 36.56 | -0.64 | 216.73 | 222.13 | 142.91 | 79.22 | -1.38 |
| | High Family | P42 | 255.07 | 215.35 | 142.27 | 73.08 | -47.05 | 552.65 | 466.59 | 308.25 | 158.34 | -101.94 |
| NJ | First Option Hlth Plan of NJ | | | | | | | | | | | |
| | High Self | 2F1 | 71.83 | 105.68 | 65.96 | 39.72 | 21.76 | 155.63 | 228.97 | 142.91 | 86.06 | 47.15 |
| | High Family | 2F2 | 186.13 | 270.40 | 142.27 | 128.13 | 76.94 | 403.28 | 585.87 | 308.25 | 277.62 | 166.71 |
| NJ | HIP Health Plan of NJ | | | | | | | | | | | |
| | High Self | P91 | 78.93 | 85.74 | 64.31 | 21.43 | 1.70 | 171.02 | 185.77 | 139.33 | 46.44 | 3.69 |
| | High Family | P92 | 196.56 | 213.52 | 142.27 | 71.25 | 9.63 | 425.88 | 462.63 | 308.25 | 154.38 | 20.87 |
| NJ | NYLCare Health Plans | | | | | | | | | | | |
| | High Self | HK1 | 71.38 | 78.80 | 59.10 | 19.70 | 1.86 | 154.66 | 170.73 | 128.05 | 42.68 | 4.02 |
| | High Family | HK2 | 185.58 | 204.93 | 142.27 | 62.66 | 12.02 | 402.09 | 444.02 | 308.25 | 135.77 | 26.05 |
| NJ | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | 8P1 | 90.14 | 97.58 | 65.96 | 31.62 | 4.31 | 195.30 | 211.42 | 142.91 | 68.51 | 9.34 |
| | High Family | 8P2 | 234.35 | 253.72 | 142.27 | 111.45 | 12.04 | 507.76 | 549.73 | 308.25 | 241.48 | 26.09 |
| NJ | QualMed Plans for Health | | | | | | | | | | | |
| | High Self | 271 | 75.13 | 82.33 | 61.75 | 20.58 | 1.80 | 162.78 | 178.38 | 133.79 | 44.59 | 3.90 |
| | High Family | 272 | 185.78 | 190.26 | 142.27 | 47.99 | -2.85 | 402.52 | 412.23 | 308.25 | 103.98 | -6.17 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 42

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|--------------------------|-----|--------|--------|--------|-------|-------|--------|--------|--------|--------|-------|
| NM | FHP NM | | | | | | | | | | | |
| | High Self | P21 | 54.62 | 49.44 | 37.08 | 12.36 | -1.29 | 118.34 | 107.12 | 80.34 | 26.78 | -2.80 |
| | High Family | P22 | 147.08 | 129.04 | 96.78 | 32.26 | -4.51 | 318.67 | 279.59 | 209.69 | 69.90 | -9.77 |
| NM | Lovelace Health Plan | | | | | | | | | | | |
| | High Self | Q11 | 61.57 | 61.57 | 46.18 | 15.39 | 0.00 | 133.40 | 133.40 | 100.05 | 33.35 | 0.00 |
| | High Family | Q12 | 160.11 | 160.11 | 120.08 | 40.03 | 0.00 | 346.91 | 346.91 | 260.18 | 86.73 | 0.00 |
| NM | QualMed Plans for Health | | | | | | | | | | | |
| | High Self | PX1 | 63.88 | 65.23 | 48.92 | 16.31 | 0.34 | 138.41 | 141.33 | 106.00 | 35.33 | 0.73 |
| | High Family | PX2 | 168.64 | 172.21 | 129.16 | 43.05 | 0.89 | 365.39 | 373.12 | 279.84 | 93.28 | 1.93 |
| NY | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | JC1 | 80.86 | 86.12 | 64.59 | 21.53 | 1.32 | 175.20 | 186.59 | 139.94 | 46.65 | 2.85 |
| | High Family | JC2 | 204.72 | 218.03 | 142.27 | 75.76 | 5.98 | 443.56 | 472.40 | 308.25 | 164.15 | 12.96 |
| NY | Blue Choice | | | | | | | | | | | |
| | High Self | MK1 | 71.66 | 66.86 | 50.15 | 16.71 | -1.20 | 155.26 | 144.86 | 108.65 | 36.21 | -2.60 |
| | High Family | MK2 | 181.15 | 169.03 | 126.77 | 42.26 | -3.95 | 392.49 | 366.23 | 274.67 | 91.56 | -8.56 |
| NY | BlueChoice HMO | | | | | | | | | | | |
| | High Self | 5K1 | 69.78 | 85.51 | 64.13 | 21.38 | 3.94 | 151.19 | 185.27 | 138.95 | 46.32 | 8.52 |
| | High Family | 5K2 | 183.34 | 224.60 | 142.27 | 82.33 | 33.93 | 397.24 | 486.63 | 308.25 | 178.38 | 73.51 |
| NY | BlueChoice HMO | | | | | | | | | | | |
| | High Self | 5L1 | 60.72 | 71.58 | 53.69 | 17.89 | 2.71 | 131.56 | 155.09 | 116.32 | 38.77 | 5.88 |
| | High Family | 5L2 | 159.61 | 188.15 | 141.11 | 47.04 | 7.14 | 345.82 | 407.66 | 305.75 | 101.91 | 15.46 |
| NY | BlueChoice HMO | | | | | | | | | | | |
| | High Self | S71 | 79.09 | 89.13 | 65.96 | 23.17 | 3.40 | 171.36 | 193.12 | 142.91 | 50.21 | 7.37 |
| | High Family | S72 | 207.75 | 234.07 | 142.27 | 91.80 | 18.99 | 450.13 | 507.15 | 308.25 | 198.90 | 41.14 |
| NY | C.D.P.H.P. | | | | | | | | | | | |
| | High Self | SG1 | 74.29 | 71.28 | 53.46 | 17.82 | -0.75 | 160.96 | 154.44 | 115.83 | 38.61 | -1.63 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 43

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-----------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NY | High Family | SG2 | 197.80 | 189.80 | 142.27 | 47.53 | -15.33 | 428.57 | 411.23 | 308.25 | 102.98 | -33.22 |
| | CHP/Kaiser Permanente | | | | | | | | | | | |
| | High Self | QH1 | 79.34 | 80.39 | 60.29 | 20.10 | 0.27 | 171.90 | 174.18 | 130.64 | 43.54 | 0.57 |
| | High Family | QH2 | 191.63 | 196.07 | 142.27 | 53.80 | -2.89 | 415.20 | 424.82 | 308.25 | 116.57 | -6.26 |
| NY | CIGNA HealthCare of NY | | | | | | | | | | | |
| | High Self | HU1 | 81.82 | 79.48 | 59.61 | 19.87 | -0.58 | 177.28 | 172.21 | 129.16 | 43.05 | -1.27 |
| | High Family | HU2 | 209.55 | 212.20 | 142.27 | 69.93 | -4.68 | 454.03 | 459.77 | 308.25 | 151.52 | -10.14 |
| NY | Community Health Plan | | | | | | | | | | | |
| | High Self | PW1 | 69.19 | 72.46 | 54.35 | 18.11 | 0.81 | 149.91 | 157.00 | 117.75 | 39.25 | 1.77 |
| | High Family | PW2 | 176.20 | 183.49 | 137.62 | 45.87 | 1.82 | 381.77 | 397.56 | 298.17 | 99.39 | 3.95 |
| NY | Community Health Plan | | | | | | | | | | | |
| | High Self | QB1 | 82.88 | 85.23 | 63.92 | 21.31 | 0.59 | 179.57 | 184.67 | 138.50 | 46.17 | 1.28 |
| | High Family | QB2 | 213.29 | 218.17 | 142.27 | 75.90 | -2.45 | 462.13 | 472.70 | 308.25 | 164.45 | -5.31 |
| NY | Harvard Community Hlth Plan | | | | | | | | | | | |
| | High Self | 681 | 92.01 | 102.28 | 65.96 | 36.32 | 7.14 | 199.36 | 221.61 | 142.91 | 78.70 | 15.47 |
| | High Family | 682 | 243.85 | 271.04 | 142.27 | 128.77 | 19.86 | 528.34 | 587.25 | 308.25 | 279.00 | 43.03 |
| NY | HealthCarePlan | | | | | | | | | | | |
| | High Self | Q81 | 64.32 | 66.42 | 49.82 | 16.60 | 0.52 | 139.36 | 143.91 | 107.93 | 35.98 | 1.14 |
| | High Family | Q82 | 183.76 | 189.80 | 142.27 | 47.53 | -1.29 | 398.15 | 411.23 | 308.25 | 102.98 | -2.80 |
| NY | Healthsource HMO of NY | | | | | | | | | | | |
| | High Self | XL1 | 84.70 | 88.22 | 65.96 | 22.26 | 0.39 | 183.52 | 191.14 | 142.91 | 48.23 | 0.84 |
| | High Family | XL2 | 230.74 | 236.95 | 142.27 | 94.68 | -1.12 | 499.94 | 513.39 | 308.25 | 205.14 | -2.43 |
| NY | HIP of Greater New York | | | | | | | | | | | |
| | High Self | 511 | 84.47 | 75.13 | 56.35 | 18.78 | -2.86 | 183.02 | 162.78 | 122.09 | 40.69 | -6.20 |
| | High Family | 512 | 212.50 | 183.39 | 137.54 | 45.85 | -31.71 | 460.42 | 397.35 | 298.01 | 99.34 | -68.71 |
| NY | HMO Blue | | | | | | | | | | | |
| | High Self | AH1 | 74.13 | 67.55 | 50.66 | 16.89 | -1.64 | 160.62 | 146.36 | 109.77 | 36.59 | -3.56 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 44

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|--------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| NY | High Family | AH2 | 186.77 | 171.62 | 128.72 | 42.90 | -8.93 | 404.67 | 371.84 | 278.88 | 92.96 | -19.34 |
| | HMO-CNY | | | | | | | | | | | |
| | High Self | EB1 | 80.44 | 71.90 | 53.93 | 17.97 | -2.14 | 174.29 | 155.78 | 116.84 | 38.94 | -4.63 |
| | High Family | EB2 | 204.50 | 182.80 | 137.10 | 45.70 | -23.86 | 443.08 | 396.07 | 297.05 | 99.02 | -51.69 |
| NY | Independent Health Assoc | | | | | | | | | | | |
| | High Self | C11 | 89.01 | 98.94 | 65.96 | 32.98 | 6.80 | 192.86 | 214.37 | 142.91 | 71.46 | 14.73 |
| | High Family | C12 | 236.35 | 262.71 | 142.27 | 120.44 | 19.03 | 512.09 | 569.21 | 308.25 | 260.96 | 41.24 |
| NY | Independent Health Assoc | | | | | | | | | | | |
| | High Self | QA1 | 55.04 | 56.76 | 42.57 | 14.19 | 0.43 | 119.25 | 122.98 | 92.24 | 30.74 | 0.93 |
| | High Family | QA2 | 154.50 | 159.34 | 119.51 | 39.83 | 1.21 | 334.75 | 345.24 | 258.93 | 86.31 | 2.62 |
| NY | MVP Health Plan | | | | | | | | | | | |
| | High Self | GA1 | 71.04 | 74.74 | 56.06 | 18.68 | 0.92 | 153.92 | 161.94 | 121.46 | 40.48 | 2.00 |
| | High Family | GA2 | 180.59 | 189.98 | 142.27 | 47.71 | 2.06 | 391.28 | 411.62 | 308.25 | 103.37 | 4.46 |
| NY | MVP Health Plan | | | | | | | | | | | |
| | High Self | M91 | 66.27 | 71.98 | 53.99 | 17.99 | 1.42 | 143.59 | 155.96 | 116.97 | 38.99 | 3.09 |
| | High Family | M92 | 168.45 | 182.98 | 137.24 | 45.74 | 3.63 | 364.98 | 396.46 | 297.35 | 99.11 | 7.87 |
| NY | MVP Health Plan | | | | | | | | | | | |
| | High Self | MX1 | 81.54 | 84.90 | 63.68 | 21.22 | 0.84 | 176.67 | 183.95 | 137.96 | 45.99 | 1.82 |
| | High Family | MX2 | 207.31 | 215.77 | 142.27 | 73.50 | 1.13 | 449.17 | 467.50 | 308.25 | 159.25 | 2.45 |
| NY | NYLCare Health Plans | | | | | | | | | | | |
| | High Self | HV1 | 78.22 | 89.45 | 65.96 | 23.49 | 3.94 | 169.48 | 193.81 | 142.91 | 50.90 | 8.53 |
| | High Family | HV2 | 203.34 | 232.58 | 142.27 | 90.31 | 21.91 | 440.57 | 503.92 | 308.25 | 195.67 | 47.47 |
| NY | PHP/Slocum-Dickson | | | | | | | | | | | |
| | High Self | SH1 | 74.56 | 81.62 | 61.22 | 20.40 | 1.76 | 161.55 | 176.84 | 132.63 | 44.21 | 3.82 |
| | High Family | SH2 | 197.50 | 216.25 | 142.27 | 73.98 | 11.42 | 427.92 | 468.54 | 308.25 | 160.29 | 24.74 |
| NY | Preferred Care | | | | | | | | | | | |
| | High Self | GV1 | 74.41 | 71.44 | 53.58 | 17.86 | -0.74 | 161.22 | 154.79 | 116.09 | 38.70 | -1.60 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 45

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-------------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|---------|
| NY | High Family | GV2 | 188.82 | 181.27 | 135.95 | 45.32 | -8.56 | 409.11 | 392.75 | 294.56 | 98.19 | -18.55 |
| | Prepaid Health Plan | | | | | | | | | | | |
| | High Self | QE1 | 77.21 | 83.26 | 62.45 | 20.81 | 1.51 | 167.29 | 180.40 | 135.30 | 45.10 | 3.28 |
| | High Family | QE2 | 204.38 | 219.89 | 142.27 | 77.62 | 8.18 | 442.82 | 476.43 | 308.25 | 168.18 | 17.73 |
| NY | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | 9P1 | 83.00 | 93.35 | 65.96 | 27.39 | 6.64 | 179.83 | 202.26 | 142.91 | 59.35 | 14.39 |
| | High Family | 9P2 | 199.12 | 223.97 | 142.27 | 81.70 | 17.52 | 431.43 | 485.27 | 308.25 | 177.02 | 37.96 |
| NY | United HealthCare of New York | | | | | | | | | | | |
| | High Self | 3M1 | 86.23 | 94.83 | 65.96 | 28.87 | 5.47 | 186.83 | 205.47 | 142.91 | 62.56 | 11.86 |
| | High Family | 3M2 | 227.12 | 249.80 | 142.27 | 107.53 | 15.35 | 492.09 | 541.23 | 308.25 | 232.98 | 33.26 |
| NY | Vytra Healthcare | | | | | | | | | | | |
| | High Self | J61 | 85.05 | 89.24 | 65.96 | 23.28 | 1.06 | 184.28 | 193.35 | 142.91 | 50.44 | 2.29 |
| | High Family | J62 | 222.44 | 233.40 | 142.27 | 91.13 | 3.63 | 481.95 | 505.70 | 308.25 | 197.45 | 7.87 |
| NY | WellCare of New York | | | | | | | | | | | |
| | High Self | 6V1 | 101.86 | 87.19 | 65.39 | 21.80 | -17.23 | 220.70 | 188.91 | 141.68 | 47.23 | -37.34 |
| | High Family | 6V2 | 265.99 | 219.22 | 142.27 | 76.95 | -54.10 | 576.31 | 474.98 | 308.25 | 166.73 | -117.21 |
| NY | WellCare of New York | | | | | | | | | | | |
| | High Self | X41 | 88.44 | 77.71 | 58.28 | 19.43 | -6.18 | 191.62 | 168.37 | 126.28 | 42.09 | -13.40 |
| | High Family | X42 | 230.99 | 195.57 | 142.27 | 53.30 | -42.75 | 500.48 | 423.74 | 308.25 | 115.49 | -92.62 |
| NC | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | 3G1 | 74.71 | 74.71 | 56.03 | 18.68 | 0.00 | 161.87 | 161.87 | 121.40 | 40.47 | 0.00 |
| | High Family | 3G2 | 195.35 | 195.35 | 142.27 | 53.08 | -7.33 | 423.26 | 423.26 | 308.25 | 115.01 | -15.88 |
| NC | Doctors Health Plan, Inc. | | | | | | | | | | | |
| | High Self | 6D1 | 67.41 | 81.88 | 61.41 | 20.47 | 3.62 | 146.06 | 177.41 | 133.06 | 44.35 | 7.84 |
| | High Family | 6D2 | 178.63 | 221.08 | 142.27 | 78.81 | 34.15 | 387.03 | 479.01 | 308.25 | 170.76 | 74.00 |
| NC | Kaiser Permanente | | | | | | | | | | | |
| | High Self | QT1 | 54.91 | 59.51 | 44.63 | 14.88 | 1.15 | 118.97 | 128.94 | 96.71 | 32.23 | 2.49 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 46

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|----------------------------|-----|--------|--------|--------|-------|--------|--------|--------|--------|--------|--------|
| NC | High Family | QT2 | 156.69 | 178.53 | 133.90 | 44.63 | 5.46 | 339.50 | 386.82 | 290.12 | 96.70 | 11.83 |
| | Maxicare North Carolina | | | | | | | | | | | |
| | High Self | Q51 | 76.88 | 76.20 | 57.15 | 19.05 | -0.17 | 166.57 | 165.10 | 123.83 | 41.27 | -0.37 |
| | High Family | Q52 | 188.66 | 186.61 | 139.96 | 46.65 | -7.07 | 408.76 | 404.32 | 303.24 | 101.08 | -15.31 |
| NC | PARTNERS NHP of NC | | | | | | | | | | | |
| | High Self | EQ1 | 78.84 | 83.82 | 62.87 | 20.95 | 1.24 | 170.82 | 181.61 | 136.21 | 45.40 | 2.70 |
| | High Family | EQ2 | 177.40 | 188.58 | 141.44 | 47.14 | 2.79 | 384.37 | 408.59 | 306.44 | 102.15 | 6.06 |
| NC | Personal Care Plan of NC | | | | | | | | | | | |
| | High Self | 4X1 | 77.24 | 84.58 | 63.44 | 21.14 | 1.83 | 167.35 | 183.26 | 137.45 | 45.81 | 3.97 |
| | High Family | 4X2 | 180.94 | 198.13 | 142.27 | 55.86 | 9.86 | 392.04 | 429.28 | 308.25 | 121.03 | 21.36 |
| NC | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | Q41 | 59.92 | 61.66 | 46.25 | 15.41 | 0.43 | 129.83 | 133.60 | 100.20 | 33.40 | 0.94 |
| | High Family | Q42 | 167.78 | 172.63 | 129.47 | 43.16 | 1.22 | 363.52 | 374.03 | 280.52 | 93.51 | 2.63 |
| NC | UHC of North Carolina | | | | | | | | | | | |
| | High Self | XM1 | 89.90 | 96.44 | 65.96 | 30.48 | 3.41 | 194.78 | 208.95 | 142.91 | 66.04 | 7.39 |
| | High Family | XM2 | 202.92 | 217.69 | 142.27 | 75.42 | 7.44 | 439.66 | 471.66 | 308.25 | 163.41 | 16.12 |
| NC | WellPath Select | | | | | | | | | | | |
| | High Self | 2E1 | 70.38 | 70.22 | 52.67 | 17.55 | -0.04 | 152.49 | 152.14 | 114.11 | 38.03 | -0.09 |
| | High Family | 2E2 | 182.97 | 182.55 | 136.91 | 45.64 | -2.39 | 396.44 | 395.53 | 296.65 | 98.88 | -5.19 |
| ND | Altru Health Plan | | | | | | | | | | | |
| | High Self | 2R1 | 73.84 | 64.16 | 48.12 | 16.04 | -2.42 | 159.99 | 139.01 | 104.26 | 34.75 | -5.25 |
| | High Family | 2R2 | 212.09 | 184.69 | 138.52 | 46.17 | -30.98 | 459.53 | 400.16 | 300.12 | 100.04 | -67.12 |
| ND | HealthPartners Health Plan | | | | | | | | | | | |
| | High Self | HQ1 | 82.50 | 84.69 | 63.52 | 21.17 | 0.55 | 178.75 | 183.50 | 137.63 | 45.87 | 1.18 |
| | High Family | HQ2 | 206.26 | 211.72 | 142.27 | 69.45 | -1.87 | 446.90 | 458.73 | 308.25 | 150.48 | -4.05 |
| ND | Heart of America HMO | | | | | | | | | | | |
| | High Self | RU1 | 68.58 | 80.48 | 60.36 | 20.12 | 2.98 | 148.59 | 174.37 | 130.78 | 43.59 | 6.44 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 47

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|--------|--------|--------|-------|--------|--------|--------|--------|--------|--------|
| OH | High Family | RU2 | 181.25 | 205.18 | 142.27 | 62.91 | 16.60 | 392.71 | 444.56 | 308.25 | 136.31 | 35.97 |
| | Advantage Health Plan-OH/WVA | | | | | | | | | | | |
| | High Self | QJ1 | 60.15 | 74.15 | 55.61 | 18.54 | 3.50 | 130.33 | 160.66 | 120.50 | 40.16 | 7.58 |
| | High Family | QJ2 | 155.69 | 181.64 | 136.23 | 45.41 | 6.49 | 337.33 | 393.55 | 295.16 | 98.39 | 14.06 |
| OH | Advantage Health Plan-OH/WVA | | | | | | | | | | | |
| | High Self | QL1 | 64.37 | 74.68 | 56.01 | 18.67 | 2.58 | 139.47 | 161.81 | 121.36 | 40.45 | 5.58 |
| | High Family | QL2 | 166.59 | 176.94 | 132.71 | 44.23 | 2.58 | 360.95 | 383.37 | 287.53 | 95.84 | 5.60 |
| OH | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | RD1 | 79.59 | 88.02 | 65.96 | 22.06 | 2.16 | 172.45 | 190.71 | 142.91 | 47.80 | 4.69 |
| | High Family | RD2 | 192.76 | 213.16 | 142.27 | 70.89 | 13.07 | 417.65 | 461.85 | 308.25 | 153.60 | 28.32 |
| OH | AultCare HMO | | | | | | | | | | | |
| | High Self | 3A1 | 66.05 | 79.19 | 59.39 | 19.80 | 3.29 | 143.11 | 171.58 | 128.69 | 42.89 | 7.11 |
| | High Family | 3A2 | 162.15 | 206.66 | 142.27 | 64.39 | 23.85 | 351.33 | 447.76 | 308.25 | 139.51 | 51.68 |
| OH | CHP of Ohio | | | | | | | | | | | |
| | High Self | MG1 | 89.77 | 72.87 | 54.65 | 18.22 | -8.72 | 194.50 | 157.89 | 118.42 | 39.47 | -18.90 |
| | High Family | MG2 | 177.59 | 137.80 | 103.35 | 34.45 | -9.95 | 384.78 | 298.57 | 223.93 | 74.64 | -21.55 |
| OH | CIGNA of Ohio | | | | | | | | | | | |
| | High Self | R41 | 79.76 | 73.78 | 55.34 | 18.44 | -1.50 | 172.81 | 159.86 | 119.90 | 39.96 | -3.24 |
| | High Family | R42 | 199.40 | 184.44 | 138.33 | 46.11 | -18.35 | 432.03 | 399.62 | 299.72 | 99.90 | -39.76 |
| OH | DayMed Hlth Maintenance Plan | | | | | | | | | | | |
| | High Self | Q31 | 75.34 | 85.29 | 63.97 | 21.32 | 2.49 | 163.24 | 184.80 | 138.60 | 46.20 | 5.39 |
| | High Family | Q32 | 183.42 | 207.67 | 142.27 | 65.40 | 16.92 | 397.41 | 449.95 | 308.25 | 141.70 | 36.66 |
| OH | Health Maintenance Plan(HMP) | | | | | | | | | | | |
| | High Self | R51 | 82.67 | 82.67 | 62.00 | 20.67 | 0.00 | 179.12 | 179.12 | 134.34 | 44.78 | 0.00 |
| | High Family | R52 | 190.14 | 190.14 | 142.27 | 47.87 | -7.33 | 411.97 | 411.97 | 308.25 | 103.72 | -15.88 |
| OH | Health Plan Upper OH Valley | | | | | | | | | | | |
| | High Self | U41 | 82.96 | 96.17 | 65.96 | 30.21 | 9.47 | 179.75 | 208.37 | 142.91 | 65.46 | 20.52 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 48

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|--------------------------|-----|----------|--------|--------|--------|--------|----------|--------|--------|--------|--------|
| OH | High Family | U42 | 207.25 | 240.42 | 142.27 | 98.15 | 25.84 | 449.04 | 520.91 | 308.25 | 212.66 | 55.99 |
| | Health Power HMO | | | | | | | | | | | |
| | High Self | 3R1 | 80.27 | 92.31 | 65.96 | 26.35 | 6.28 | 173.92 | 200.01 | 142.91 | 57.10 | 13.62 |
| | High Family | 3R2 | 200.69 | 230.80 | 142.27 | 88.53 | 22.78 | 434.83 | 500.07 | 308.25 | 191.82 | 49.36 |
| OH | Health Power HMO | | | | | | | | | | | |
| | High Self | XR1 | 73.41 | 84.42 | 63.32 | 21.10 | 2.75 | 159.06 | 182.91 | 137.18 | 45.73 | 5.97 |
| | High Family | XR2 | 183.55 | 211.08 | 142.27 | 68.81 | 20.20 | 397.69 | 457.34 | 308.25 | 149.09 | 43.77 |
| OH | HealthAssurance HMO | | | | | | | | | | | |
| | High Self | 5X1 | New Plan | 86.75 | 65.06 | 21.69 | N/A | New Plan | 187.96 | 140.97 | 46.99 | N/A |
| | High Family | 5X2 | New Plan | 201.81 | 142.27 | 59.54 | N/A | New Plan | 437.26 | 308.25 | 129.01 | N/A |
| OH | Healthsource Ohio | | | | | | | | | | | |
| | High Self | 3H1 | 82.23 | 75.63 | 56.72 | 18.91 | -1.65 | 178.17 | 163.87 | 122.90 | 40.97 | -3.57 |
| | High Family | 3H2 | 179.26 | 186.04 | 139.53 | 46.51 | 1.70 | 388.40 | 403.09 | 302.32 | 100.77 | 3.67 |
| OH | HMO Health Ohio | | | | | | | | | | | |
| | High Self | L41 | 70.43 | 87.58 | 65.69 | 21.89 | 4.28 | 152.60 | 189.76 | 142.32 | 47.44 | 9.29 |
| | High Family | L42 | 180.16 | 224.01 | 142.27 | 81.74 | 36.52 | 390.35 | 485.36 | 308.25 | 177.11 | 79.13 |
| OH | HMO Health Ohio | | | | | | | | | | | |
| | High Self | OH1 | 71.16 | 125.35 | 65.96 | 59.39 | 41.60 | 154.18 | 271.59 | 142.91 | 128.68 | 90.14 |
| | High Family | OH2 | 185.49 | 320.65 | 142.27 | 178.38 | 127.83 | 401.90 | 694.74 | 308.25 | 386.49 | 276.96 |
| OH | Kaiser Permanente | | | | | | | | | | | |
| | High Self | 641 | 80.75 | 81.04 | 60.78 | 20.26 | 0.07 | 174.96 | 175.59 | 131.69 | 43.90 | 0.16 |
| | High Family | 642 | 172.80 | 186.40 | 139.80 | 46.60 | 3.40 | 374.40 | 403.87 | 302.90 | 100.97 | 7.37 |
| OH | Medical Value Plan | | | | | | | | | | | |
| | High Self | EV1 | 77.31 | 77.39 | 58.04 | 19.35 | 0.02 | 167.51 | 167.68 | 125.76 | 41.92 | 0.04 |
| | High Family | EV2 | 204.12 | 204.30 | 142.27 | 62.03 | -7.15 | 442.26 | 442.65 | 308.25 | 134.40 | -15.49 |
| OH | PacifiCare of Ohio, Inc. | | | | | | | | | | | |
| | High Self | R81 | 80.06 | 84.06 | 63.05 | 21.01 | 1.00 | 173.46 | 182.13 | 136.60 | 45.53 | 2.17 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 49

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|----------------------------|-----|----------|--------|--------|-------|--------|----------|--------|--------|--------|--------|
| OH | High Family | R82 | 189.01 | 198.46 | 142.27 | 56.19 | 2.12 | 409.52 | 430.00 | 308.25 | 121.75 | 4.60 |
| | Paramount Health Care | | | | | | | | | | | |
| | High Self | U21 | 79.12 | 80.78 | 60.59 | 20.19 | 0.41 | 171.43 | 175.02 | 131.27 | 43.75 | 0.89 |
| | High Family | U22 | 209.64 | 214.03 | 142.27 | 71.76 | -2.94 | 454.22 | 463.73 | 308.25 | 155.48 | -6.37 |
| OH | Personal Physician Care | | | | | | | | | | | |
| | High Self | PL1 | 76.20 | 85.27 | 63.95 | 21.32 | 2.27 | 165.10 | 184.75 | 138.56 | 46.19 | 4.92 |
| | High Family | PL2 | 204.77 | 221.71 | 142.27 | 79.44 | 9.61 | 443.67 | 480.37 | 308.25 | 172.12 | 20.82 |
| OH | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | AY1 | 79.00 | 88.98 | 65.96 | 23.02 | 3.27 | 171.17 | 192.79 | 142.91 | 49.88 | 7.09 |
| | High Family | AY2 | 214.31 | 195.36 | 142.27 | 53.09 | -26.28 | 464.34 | 423.28 | 308.25 | 115.03 | -56.94 |
| OH | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | Q91 | 72.24 | 77.37 | 58.03 | 19.34 | 1.28 | 156.52 | 167.64 | 125.73 | 41.91 | 2.78 |
| | High Family | Q92 | 196.00 | 181.40 | 136.05 | 45.35 | -15.71 | 424.67 | 393.03 | 294.77 | 98.26 | -34.04 |
| OH | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | S31 | 62.00 | 72.09 | 54.07 | 18.02 | 2.52 | 134.33 | 156.20 | 117.15 | 39.05 | 5.47 |
| | High Family | S32 | 168.24 | 187.25 | 140.44 | 46.81 | 4.75 | 364.52 | 405.71 | 304.28 | 101.43 | 10.30 |
| OH | SummaCare Health Plan | | | | | | | | | | | |
| | High Self | 5W1 | New Plan | 71.42 | 53.57 | 17.85 | N/A | New Plan | 154.74 | 116.06 | 38.68 | N/A |
| | High Family | 5W2 | New Plan | 178.55 | 133.91 | 44.64 | N/A | New Plan | 386.86 | 290.15 | 96.71 | N/A |
| OH | Super Med HMO | | | | | | | | | | | |
| | High Self | 5M1 | 70.16 | 90.03 | 65.96 | 24.07 | 6.53 | 152.01 | 195.07 | 142.91 | 52.16 | 14.16 |
| | High Family | 5M2 | 179.45 | 230.33 | 142.27 | 88.06 | 43.20 | 388.81 | 499.05 | 308.25 | 190.80 | 93.60 |
| OH | United Health Care of Ohio | | | | | | | | | | | |
| | High Self | 3U1 | 85.22 | 90.57 | 65.96 | 24.61 | 2.22 | 184.64 | 196.24 | 142.91 | 53.33 | 4.82 |
| | High Family | 3U2 | 186.64 | 203.41 | 142.27 | 61.14 | 9.44 | 404.39 | 440.72 | 308.25 | 132.47 | 20.45 |
| OH | United Health Care of Ohio | | | | | | | | | | | |
| | High Self | VC1 | 91.56 | 99.73 | 65.96 | 33.77 | 5.04 | 198.38 | 216.08 | 142.91 | 73.17 | 10.92 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 50

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|----------|--------|--------|-------|-------|----------|--------|--------|--------|-------|
| OK | High Family | VC2 | 200.54 | 229.37 | 142.27 | 87.10 | 21.50 | 434.50 | 496.97 | 308.25 | 188.72 | 46.59 |
| | BlueLincs HMO | | | | | | | | | | | |
| | High Self | N51 | 67.03 | 76.02 | 57.02 | 19.00 | 2.24 | 145.23 | 164.71 | 123.53 | 41.18 | 4.87 |
| | High Family | N52 | 163.70 | 184.26 | 138.20 | 46.06 | 5.14 | 354.68 | 399.23 | 299.42 | 99.81 | 11.14 |
| OK | CommunityCare HMO | | | | | | | | | | | |
| | High Self | 7C1 | New Plan | 63.22 | 47.42 | 15.80 | N/A | New Plan | 136.98 | 102.74 | 34.24 | N/A |
| | High Family | 7C2 | New Plan | 162.94 | 122.21 | 40.73 | N/A | New Plan | 353.04 | 264.78 | 88.26 | N/A |
| OK | Foundation Health Oklahoma | | | | | | | | | | | |
| | High Self | 6G1 | New Plan | 74.22 | 55.67 | 18.55 | N/A | New Plan | 160.81 | 120.61 | 40.20 | N/A |
| | High Family | 6G2 | New Plan | 185.57 | 139.18 | 46.39 | N/A | New Plan | 402.07 | 301.55 | 100.52 | N/A |
| OK | Healthcare Oklahoma | | | | | | | | | | | |
| | High Self | 6W1 | 68.82 | 71.43 | 53.57 | 17.86 | 0.66 | 149.11 | 154.77 | 116.08 | 38.69 | 1.41 |
| | High Family | 6W2 | 178.82 | 186.06 | 139.55 | 46.51 | 1.81 | 387.44 | 403.13 | 302.35 | 100.78 | 3.92 |
| OK | PacifiCare OK | | | | | | | | | | | |
| | High Self | 2N1 | 63.93 | 68.03 | 51.02 | 17.01 | 1.03 | 138.52 | 147.40 | 110.55 | 36.85 | 2.22 |
| | High Family | 2N2 | 167.47 | 185.88 | 139.41 | 46.47 | 4.60 | 362.85 | 402.74 | 302.06 | 100.68 | 9.97 |
| OK | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | RR1 | 67.03 | 67.03 | 50.27 | 16.76 | 0.00 | 145.23 | 145.23 | 108.92 | 36.31 | 0.00 |
| | High Family | RR2 | 178.40 | 178.40 | 133.80 | 44.60 | 0.00 | 386.53 | 386.53 | 289.90 | 96.63 | 0.00 |
| OK | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | RS1 | 71.69 | 70.25 | 52.69 | 17.56 | -0.36 | 155.33 | 152.21 | 114.16 | 38.05 | -0.78 |
| | High Family | RS2 | 177.96 | 174.41 | 130.81 | 43.60 | -0.89 | 385.58 | 377.89 | 283.42 | 94.47 | -1.92 |
| OR | Health Maintenance of Oregon | | | | | | | | | | | |
| | High Self | 6B1 | 82.11 | 83.14 | 62.36 | 20.78 | 0.25 | 177.91 | 180.14 | 135.11 | 45.03 | 0.55 |
| | High Family | 6B2 | 181.79 | 184.06 | 138.05 | 46.01 | -0.84 | 393.88 | 398.80 | 299.10 | 99.70 | -1.81 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 51

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|----------------------------|-----|--------|--------|--------|-------|-------|--------|--------|--------|--------|--------|
| OR | Kaiser Permanente | | | | | | | | | | | |
| | High Self | 571 | 84.57 | 92.80 | 65.96 | 26.84 | 5.10 | 183.24 | 201.07 | 142.91 | 58.16 | 11.05 |
| | High Family | 572 | 195.04 | 212.35 | 142.27 | 70.08 | 9.98 | 422.59 | 460.09 | 308.25 | 151.84 | 21.62 |
| | Standard Self | 574 | 75.77 | 80.70 | 60.53 | 20.17 | 1.23 | 164.17 | 174.85 | 131.14 | 43.71 | 2.67 |
| | Standard Family | 575 | 162.15 | 185.58 | 139.19 | 46.39 | 5.85 | 351.33 | 402.09 | 301.57 | 100.52 | 12.69 |
| OR | PacifiCare of Oregon | | | | | | | | | | | |
| | High Self | SS1 | 82.88 | 81.73 | 61.30 | 20.43 | -0.29 | 179.57 | 177.08 | 132.81 | 44.27 | -0.62 |
| | High Family | SS2 | 187.95 | 181.56 | 136.17 | 45.39 | -7.62 | 407.23 | 393.38 | 295.04 | 98.34 | -16.52 |
| OR | QualMed Oregon Health Plan | | | | | | | | | | | |
| | High Self | AF1 | 86.22 | 86.84 | 65.13 | 21.71 | -1.68 | 186.81 | 188.15 | 141.11 | 47.04 | -3.64 |
| | High Family | AF2 | 210.37 | 212.75 | 142.27 | 70.48 | -4.95 | 455.80 | 460.96 | 308.25 | 152.71 | -10.72 |
| OR | Regence HMO Oregon | | | | | | | | | | | |
| | High Self | 7A1 | 82.11 | 83.14 | 62.36 | 20.78 | 0.25 | 177.91 | 180.14 | 135.11 | 45.03 | 0.55 |
| | High Family | 7A2 | 181.79 | 184.06 | 138.05 | 46.01 | -0.84 | 393.88 | 398.80 | 299.10 | 99.70 | -1.81 |
| OR | SelectCare | | | | | | | | | | | |
| | High Self | SD1 | 73.00 | 79.98 | 59.99 | 19.99 | 1.74 | 158.17 | 173.29 | 129.97 | 43.32 | 3.78 |
| | High Family | SD2 | 176.97 | 193.88 | 142.27 | 51.61 | 7.37 | 383.44 | 420.07 | 308.25 | 111.82 | 15.96 |
| PA | Advantage Health Plan-PA | | | | | | | | | | | |
| | High Self | 241 | 77.73 | 77.63 | 58.22 | 19.41 | -0.02 | 168.42 | 168.20 | 126.15 | 42.05 | -0.05 |
| | High Family | 242 | 202.09 | 201.83 | 142.27 | 59.56 | -7.59 | 437.86 | 437.30 | 308.25 | 129.05 | -16.44 |
| PA | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | KL1 | 79.08 | 84.22 | 63.17 | 21.05 | 1.28 | 171.34 | 182.48 | 136.86 | 45.62 | 2.79 |
| | High Family | KL2 | 205.43 | 224.39 | 142.27 | 82.12 | 11.63 | 445.10 | 486.18 | 308.25 | 177.93 | 25.20 |
| | Standard Self | KL4 | 73.17 | 72.82 | 54.62 | 18.20 | -0.09 | 158.54 | 157.78 | 118.34 | 39.44 | -0.19 |
| | Standard Family | KL5 | 193.29 | 194.40 | 142.27 | 52.13 | -6.22 | 418.80 | 421.20 | 308.25 | 112.95 | -13.48 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 52

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-----------------------------|-----|--------|--------|--------|--------|-------|--------|--------|--------|--------|-------|
| PA | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | SU1 | 88.68 | 95.51 | 65.96 | 29.55 | 3.70 | 192.14 | 206.94 | 142.91 | 64.03 | 8.02 |
| | High Family | SU2 | 235.70 | 253.84 | 142.27 | 111.57 | 10.81 | 510.68 | 549.99 | 308.25 | 241.74 | 23.43 |
| | Standard Self | SU4 | 72.81 | 79.36 | 59.52 | 19.84 | 1.64 | 157.76 | 171.95 | 128.96 | 42.99 | 3.55 |
| | Standard Family | SU5 | 191.57 | 208.81 | 142.27 | 66.54 | 9.91 | 415.07 | 452.42 | 308.25 | 144.17 | 21.47 |
| PA | Alliance Hlth Network, Inc. | | | | | | | | | | | |
| | High Self | 5A1 | 69.82 | 76.28 | 57.21 | 19.07 | 1.62 | 151.28 | 165.27 | 123.95 | 41.32 | 3.50 |
| | High Family | 5A2 | 198.66 | 216.64 | 142.27 | 74.37 | 10.65 | 430.43 | 469.39 | 308.25 | 161.14 | 23.08 |
| PA | First Priority Hlth | | | | | | | | | | | |
| | High Self | C81 | 67.00 | 74.95 | 56.21 | 18.74 | 1.99 | 145.17 | 162.39 | 121.79 | 40.60 | 4.31 |
| | High Family | C82 | 172.65 | 193.22 | 142.27 | 50.95 | 7.79 | 374.08 | 418.64 | 308.25 | 110.39 | 16.87 |
| PA | HealthAmerica Pennsylvania | | | | | | | | | | | |
| | High Self | 261 | 67.04 | 77.02 | 57.77 | 19.25 | 2.49 | 145.25 | 166.88 | 125.16 | 41.72 | 5.41 |
| | High Family | 262 | 199.21 | 227.50 | 142.27 | 85.23 | 20.96 | 431.62 | 492.92 | 308.25 | 184.67 | 45.42 |
| PA | HealthAmerica Pennsylvania | | | | | | | | | | | |
| | High Self | 4N1 | 72.33 | 89.61 | 65.96 | 23.65 | 5.57 | 156.72 | 194.16 | 142.91 | 51.25 | 12.07 |
| | High Family | 4N2 | 179.34 | 222.18 | 142.27 | 79.91 | 35.08 | 388.57 | 481.39 | 308.25 | 173.14 | 76.00 |
| PA | HealthAmerica Pennsylvania | | | | | | | | | | | |
| | High Self | SW1 | 74.54 | 82.04 | 61.53 | 20.51 | 1.88 | 161.50 | 177.75 | 133.31 | 44.44 | 4.07 |
| | High Family | SW2 | 192.60 | 211.93 | 142.27 | 69.66 | 12.00 | 417.30 | 459.18 | 308.25 | 150.93 | 26.00 |
| PA | HealthAmerica Pennsylvania | | | | | | | | | | | |
| | High Self | ZN1 | 60.32 | 77.79 | 58.34 | 19.45 | 4.37 | 130.69 | 168.55 | 126.41 | 42.14 | 9.47 |
| | High Family | ZN2 | 169.20 | 217.93 | 142.27 | 75.66 | 33.36 | 366.60 | 472.18 | 308.25 | 163.93 | 72.28 |
| PA | HealthGuard | | | | | | | | | | | |
| | High Self | NQ1 | 66.97 | 74.26 | 55.70 | 18.56 | 1.82 | 145.10 | 160.90 | 120.68 | 40.22 | 3.95 |
| | High Family | NQ2 | 176.63 | 197.53 | 142.27 | 55.26 | 11.10 | 382.70 | 427.98 | 308.25 | 119.73 | 24.06 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 53

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|---------------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| PA | HIP Health Plan of Pennsylvania | | | | | | | | | | | |
| | High Self | 5J1 | 86.96 | 85.52 | 64.14 | 21.38 | -2.75 | 188.41 | 185.29 | 138.97 | 46.32 | -5.96 |
| | High Family | 5J2 | 231.33 | 227.55 | 142.27 | 85.28 | -11.11 | 501.22 | 493.03 | 308.25 | 184.78 | -24.07 |
| PA | Keystone Health Plan Central | | | | | | | | | | | |
| | High Self | S41 | 75.72 | 82.34 | 61.76 | 20.58 | 1.65 | 164.06 | 178.40 | 133.80 | 44.60 | 3.59 |
| | High Family | S42 | 181.92 | 200.83 | 142.27 | 58.56 | 11.58 | 394.16 | 435.13 | 308.25 | 126.88 | 25.09 |
| PA | Keystone Health Plan East | | | | | | | | | | | |
| | High Self | ED1 | 76.26 | 82.92 | 62.19 | 20.73 | 1.67 | 165.23 | 179.66 | 134.75 | 44.91 | 3.60 |
| | High Family | ED2 | 201.98 | 219.60 | 142.27 | 77.33 | 10.29 | 437.62 | 475.80 | 308.25 | 167.55 | 22.30 |
| PA | KeystoneBlue | | | | | | | | | | | |
| | High Self | EF1 | 76.74 | 85.90 | 64.43 | 21.47 | 2.29 | 166.27 | 186.12 | 139.59 | 46.53 | 4.96 |
| | High Family | EF2 | 228.08 | 255.75 | 142.27 | 113.48 | 20.34 | 494.17 | 554.13 | 308.25 | 245.88 | 44.08 |
| PA | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | VV1 | 70.46 | 70.46 | 52.85 | 17.61 | 0.00 | 152.66 | 152.66 | 114.50 | 38.16 | 0.00 |
| | High Family | VV2 | 193.77 | 193.77 | 142.27 | 51.50 | -7.33 | 419.84 | 419.84 | 308.25 | 111.59 | -15.88 |
| PA | QualMed Plans for Health | | | | | | | | | | | |
| | High Self | 271 | 75.13 | 82.33 | 61.75 | 20.58 | 1.80 | 162.78 | 178.38 | 133.79 | 44.59 | 3.90 |
| | High Family | 272 | 185.78 | 190.26 | 142.27 | 47.99 | -2.85 | 402.52 | 412.23 | 308.25 | 103.98 | -6.17 |
| PA | QualMed Plans for Health | | | | | | | | | | | |
| | High Self | 2K1 | 72.69 | 77.23 | 57.92 | 19.31 | 1.14 | 157.50 | 167.33 | 125.50 | 41.83 | 2.46 |
| | High Family | 2K2 | 179.75 | 178.48 | 133.86 | 44.62 | -0.32 | 389.46 | 386.71 | 290.03 | 96.68 | -0.68 |
| RI | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | 5U1 | 83.84 | 72.09 | 54.07 | 18.02 | -2.99 | 181.65 | 156.20 | 117.15 | 39.05 | -6.47 |
| | High Family | 5U2 | 227.26 | 195.43 | 142.27 | 53.16 | -39.16 | 492.40 | 423.43 | 308.25 | 115.18 | -84.85 |
| RI | Harvard Community Hlth Plan | | | | | | | | | | | |
| | High Self | 681 | 92.01 | 102.28 | 65.96 | 36.32 | 7.14 | 199.36 | 221.61 | 142.91 | 78.70 | 15.47 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 54

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| RI | High Family | 682 | 243.85 | 271.04 | 142.27 | 128.77 | 19.86 | 528.34 | 587.25 | 308.25 | 279.00 | 43.03 |
| | Harvard Pilgrim Hlth Care-NE | | | | | | | | | | | |
| | High Self | 701 | 71.23 | 68.50 | 51.38 | 17.12 | -0.69 | 154.33 | 148.42 | 111.32 | 37.10 | -1.48 |
| | High Family | 702 | 170.97 | 164.37 | 123.28 | 41.09 | -1.65 | 370.44 | 356.14 | 267.11 | 89.03 | -3.58 |
| SC | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | 3G1 | 74.71 | 74.71 | 56.03 | 18.68 | 0.00 | 161.87 | 161.87 | 121.40 | 40.47 | 0.00 |
| | High Family | 3G2 | 195.35 | 195.35 | 142.27 | 53.08 | -7.33 | 423.26 | 423.26 | 308.25 | 115.01 | -15.88 |
| SC | Companion HealthCare | | | | | | | | | | | |
| | High Self | SE1 | 87.08 | 90.03 | 65.96 | 24.07 | -0.18 | 188.67 | 195.07 | 142.91 | 52.16 | -0.38 |
| | High Family | SE2 | 217.70 | 225.09 | 142.27 | 82.82 | 0.06 | 471.68 | 487.70 | 308.25 | 179.45 | 0.14 |
| SC | Doctors Health Plan, Inc. | | | | | | | | | | | |
| | High Self | 6D1 | 67.41 | 81.88 | 61.41 | 20.47 | 3.62 | 146.06 | 177.41 | 133.06 | 44.35 | 7.84 |
| | High Family | 6D2 | 178.63 | 221.08 | 142.27 | 78.81 | 34.15 | 387.03 | 479.01 | 308.25 | 170.76 | 74.00 |
| SC | Kaiser Permanente | | | | | | | | | | | |
| | High Self | QT1 | 54.91 | 59.51 | 44.63 | 14.88 | 1.15 | 118.97 | 128.94 | 96.71 | 32.23 | 2.49 |
| | High Family | QT2 | 156.69 | 178.53 | 133.90 | 44.63 | 5.46 | 339.50 | 386.82 | 290.12 | 96.70 | 11.83 |
| SC | Maxicare North Carolina | | | | | | | | | | | |
| | High Self | Q51 | 76.88 | 76.20 | 57.15 | 19.05 | -0.17 | 166.57 | 165.10 | 123.83 | 41.27 | -0.37 |
| | High Family | Q52 | 188.66 | 186.61 | 139.96 | 46.65 | -7.07 | 408.76 | 404.32 | 303.24 | 101.08 | -15.31 |
| SC | Maxicare North Carolina | | | | | | | | | | | |
| | High Self | TA1 | 89.40 | 80.45 | 60.34 | 20.11 | -6.46 | 193.70 | 174.31 | 130.73 | 43.58 | -13.99 |
| | High Family | TA2 | 216.75 | 195.05 | 142.27 | 52.78 | -29.03 | 469.63 | 422.61 | 308.25 | 114.36 | -62.90 |
| SC | PARTNERS NHP of NC | | | | | | | | | | | |
| | High Self | EQ1 | 78.84 | 83.82 | 62.87 | 20.95 | 1.24 | 170.82 | 181.61 | 136.21 | 45.40 | 2.70 |
| | High Family | EQ2 | 177.40 | 188.58 | 141.44 | 47.14 | 2.79 | 384.37 | 408.59 | 306.44 | 102.15 | 6.06 |
| SC | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | Q41 | 59.92 | 61.66 | 46.25 | 15.41 | 0.43 | 129.83 | 133.60 | 100.20 | 33.40 | 0.94 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 55

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|--------------------------------|-----|----------|--------|--------|-------|-------|----------|--------|--------|--------|-------|
| SC | High Family | Q42 | 167.78 | 172.63 | 129.47 | 43.16 | 1.22 | 363.52 | 374.03 | 280.52 | 93.51 | 2.63 |
| | WellPath Select | | | | | | | | | | | |
| | High Self | 2E1 | 70.38 | 70.22 | 52.67 | 17.55 | -0.04 | 152.49 | 152.14 | 114.11 | 38.03 | -0.09 |
| | High Family | 2E2 | 182.97 | 182.55 | 136.91 | 45.64 | -2.39 | 396.44 | 395.53 | 296.65 | 98.88 | -5.19 |
| SD | Care Choices | | | | | | | | | | | |
| | High Self | FA1 | 66.98 | 76.04 | 57.03 | 19.01 | 2.27 | 145.12 | 164.75 | 123.56 | 41.19 | 4.91 |
| | High Family | FA2 | 180.18 | 204.57 | 142.27 | 62.30 | 17.06 | 390.39 | 443.24 | 308.25 | 134.99 | 36.97 |
| SD | Community Health Plan Plus | | | | | | | | | | | |
| | High Self | 8S1 | New Plan | 66.41 | 49.81 | 16.60 | N/A | New Plan | 143.89 | 107.92 | 35.97 | N/A |
| | High Family | 8S2 | New Plan | 179.91 | 134.93 | 44.98 | N/A | New Plan | 389.81 | 292.36 | 97.45 | N/A |
| TN | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | 6J1 | New Area | 60.25 | 45.19 | 15.06 | N/A | New Area | 130.54 | 97.91 | 32.63 | N/A |
| | High Family | 6J2 | New Area | 167.09 | 125.32 | 41.77 | N/A | New Area | 362.03 | 271.52 | 90.51 | N/A |
| TN | American Healthcare Trust, Inc | | | | | | | | | | | |
| | High Self | 4U1 | New Plan | 64.15 | 48.11 | 16.04 | N/A | New Plan | 138.99 | 104.24 | 34.75 | N/A |
| | High Family | 4U2 | New Plan | 182.29 | 136.72 | 45.57 | N/A | New Plan | 394.96 | 296.22 | 98.74 | N/A |
| TN | Healthsource Tennessee, Inc. | | | | | | | | | | | |
| | High Self | HT1 | 62.31 | 68.80 | 51.60 | 17.20 | 1.62 | 135.01 | 149.07 | 111.80 | 37.27 | 3.52 |
| | High Family | HT2 | 181.79 | 200.78 | 142.27 | 58.51 | 11.66 | 393.88 | 435.02 | 308.25 | 126.77 | 25.26 |
| TN | Heritage National Healthplan | | | | | | | | | | | |
| | High Self | 4T1 | 79.59 | 86.32 | 64.74 | 21.58 | 1.68 | 172.45 | 187.03 | 140.27 | 46.76 | 3.65 |
| | High Family | 4T2 | 175.17 | 189.99 | 142.27 | 47.72 | 3.93 | 379.54 | 411.65 | 308.25 | 103.40 | 8.52 |
| TN | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | UA1 | 59.51 | 61.02 | 45.77 | 15.25 | 0.37 | 128.94 | 132.21 | 99.16 | 33.05 | 0.82 |
| | High Family | UA2 | 167.82 | 172.05 | 129.04 | 43.01 | 1.06 | 363.61 | 372.78 | 279.59 | 93.19 | 2.29 |
| TN | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | UB1 | 59.17 | 59.85 | 44.89 | 14.96 | 0.17 | 128.20 | 129.68 | 97.26 | 32.42 | 0.37 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 56

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|--------------------------------|-----|----------|--------|--------|--------|-------|----------|--------|--------|--------|-------|
| TN | High Family | UB2 | 180.43 | 182.52 | 136.89 | 45.63 | 0.14 | 390.93 | 395.46 | 296.60 | 98.86 | 0.30 |
| | United HealthCare of Tennessee | | | | | | | | | | | |
| | High Self | QR1 | 64.96 | 71.29 | 53.47 | 17.82 | 1.58 | 140.75 | 154.46 | 115.85 | 38.61 | 3.42 |
| | High Family | QR2 | 188.38 | 206.73 | 142.27 | 64.46 | 11.02 | 408.16 | 447.92 | 308.25 | 139.67 | 23.88 |
| TX | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | 5B1 | New Area | 92.82 | 65.96 | 26.86 | N/A | New Area | 201.11 | 142.91 | 58.20 | N/A |
| | High Family | 5B2 | New Area | 251.74 | 142.27 | 109.47 | N/A | New Area | 545.44 | 308.25 | 237.19 | N/A |
| TX | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | TS1 | 65.18 | 71.50 | 53.63 | 17.87 | 1.58 | 141.22 | 154.92 | 116.19 | 38.73 | 3.43 |
| | High Family | TS2 | 231.35 | 253.79 | 142.27 | 111.52 | 15.11 | 501.26 | 549.88 | 308.25 | 241.63 | 32.74 |
| TX | Certus HealthCare | | | | | | | | | | | |
| | High Self | 3Y1 | New Plan | 66.40 | 49.80 | 16.60 | N/A | New Plan | 143.87 | 107.90 | 35.97 | N/A |
| | High Family | 3Y2 | New Plan | 154.91 | 116.18 | 38.73 | N/A | New Plan | 335.64 | 251.73 | 83.91 | N/A |
| TX | Exclusive Healthcare | | | | | | | | | | | |
| | High Self | 6E1 | New Plan | 74.86 | 56.15 | 18.71 | N/A | New Plan | 162.20 | 121.65 | 40.55 | N/A |
| | High Family | 6E2 | New Plan | 202.85 | 142.27 | 60.58 | N/A | New Plan | 439.51 | 308.25 | 131.26 | N/A |
| TX | FHP NM | | | | | | | | | | | |
| | High Self | P21 | 54.62 | 49.44 | 37.08 | 12.36 | -1.29 | 118.34 | 107.12 | 80.34 | 26.78 | -2.80 |
| | High Family | P22 | 147.08 | 129.04 | 96.78 | 32.26 | -4.51 | 318.67 | 279.59 | 209.69 | 69.90 | -9.77 |
| TX | FIRSTCARE | | | | | | | | | | | |
| | High Self | 6U1 | New Area | 71.43 | 53.57 | 17.86 | N/A | New Area | 154.77 | 116.08 | 38.69 | N/A |
| | High Family | 6U2 | New Area | 153.38 | 115.04 | 38.34 | N/A | New Area | 332.32 | 249.24 | 83.08 | N/A |
| TX | FIRSTCARE | | | | | | | | | | | |
| | High Self | CK1 | 106.29 | 107.92 | 65.96 | 41.96 | -1.50 | 230.30 | 233.83 | 142.91 | 90.92 | -3.25 |
| | High Family | CK2 | 228.08 | 231.77 | 142.27 | 89.50 | -3.64 | 494.17 | 502.17 | 308.25 | 193.92 | -7.88 |
| TX | Harris Methodist | | | | | | | | | | | |
| | High Self | SC1 | 80.60 | 85.34 | 64.01 | 21.33 | 1.18 | 174.63 | 184.90 | 138.68 | 46.22 | 2.56 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 57

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-----------------------------|-----|--------|--------|--------|-------|-------|--------|--------|--------|--------|--------|
| TX | High Family | SC2 | 215.20 | 227.88 | 142.27 | 85.61 | 5.35 | 466.27 | 493.74 | 308.25 | 185.49 | 11.59 |
| | HMO BLUE - West Texas | | | | | | | | | | | |
| | High Self | 5Q1 | 60.14 | 66.11 | 49.58 | 16.53 | 1.50 | 130.30 | 143.24 | 107.43 | 35.81 | 3.24 |
| | High Family | 5Q2 | 159.36 | 176.34 | 132.26 | 44.08 | 4.24 | 345.28 | 382.07 | 286.55 | 95.52 | 9.20 |
| TX | HMO Blue, SouthWest TX | | | | | | | | | | | |
| | High Self | 5R1 | 62.77 | 69.99 | 52.49 | 17.50 | 1.81 | 136.00 | 151.65 | 113.74 | 37.91 | 3.91 |
| | High Family | 5R2 | 166.35 | 186.71 | 140.03 | 46.68 | 5.09 | 360.43 | 404.54 | 303.41 | 101.13 | 11.02 |
| TX | HMO Blue | | | | | | | | | | | |
| | High Self | 4Y1 | 69.52 | 67.52 | 50.64 | 16.88 | -0.50 | 150.63 | 146.29 | 109.72 | 36.57 | -1.09 |
| | High Family | 4Y2 | 180.60 | 179.06 | 134.30 | 44.76 | -0.90 | 391.30 | 387.96 | 290.97 | 96.99 | -1.94 |
| TX | HMO Blue | | | | | | | | | | | |
| | High Self | 4Z1 | 62.60 | 64.49 | 48.37 | 16.12 | 0.47 | 135.63 | 139.73 | 104.80 | 34.93 | 1.02 |
| | High Family | 4Z2 | 165.92 | 172.28 | 129.21 | 43.07 | 1.59 | 359.49 | 373.27 | 279.95 | 93.32 | 3.45 |
| TX | Humana Health Plan of Texas | | | | | | | | | | | |
| | High Self | S51 | 82.22 | 86.21 | 64.66 | 21.55 | 1.00 | 178.14 | 186.79 | 140.09 | 46.70 | 2.17 |
| | High Family | S52 | 211.29 | 221.50 | 142.27 | 79.23 | 2.88 | 457.80 | 479.92 | 308.25 | 171.67 | 6.24 |
| TX | Humana Health Plan of Texas | | | | | | | | | | | |
| | High Self | UE1 | 61.65 | 67.83 | 50.87 | 16.96 | 1.55 | 133.58 | 146.97 | 110.23 | 36.74 | 3.35 |
| | High Family | UE2 | 172.85 | 190.21 | 142.27 | 47.94 | 4.73 | 374.51 | 412.12 | 308.25 | 103.87 | 10.24 |
| TX | Humana Health Plan of Texas | | | | | | | | | | | |
| | High Self | UR1 | 70.71 | 71.95 | 53.96 | 17.99 | 0.31 | 153.21 | 155.89 | 116.92 | 38.97 | 0.67 |
| | High Family | UR2 | 181.75 | 184.93 | 138.70 | 46.23 | -0.58 | 393.79 | 400.68 | 300.51 | 100.17 | -1.25 |
| TX | Humana Health Plan of Texas | | | | | | | | | | | |
| | High Self | UV1 | 81.52 | 81.01 | 60.76 | 20.25 | -0.13 | 176.63 | 175.52 | 131.64 | 43.88 | -0.28 |
| | High Family | UV2 | 209.47 | 208.17 | 142.27 | 65.90 | -8.63 | 453.85 | 451.04 | 308.25 | 142.79 | -18.69 |
| TX | Humana of Corpus Christi | | | | | | | | | | | |
| | High Self | TX1 | 59.83 | 81.33 | 61.00 | 20.33 | 5.37 | 129.63 | 176.22 | 132.17 | 44.05 | 11.64 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 58

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|--------|--------|--------|-------|-------|--------|--------|--------|--------|-------|
| TX | High Family | TX2 | 180.65 | 195.18 | 142.27 | 52.91 | 7.20 | 391.41 | 422.89 | 308.25 | 114.64 | 15.60 |
| | Kaiser Permanente | | | | | | | | | | | |
| | High Self | UK1 | 65.64 | 87.85 | 65.89 | 21.96 | 5.55 | 142.22 | 190.34 | 142.76 | 47.58 | 12.03 |
| | High Family | UK2 | 168.70 | 216.99 | 142.27 | 74.72 | 32.55 | 365.52 | 470.15 | 308.25 | 161.90 | 70.52 |
| TX | NYLCare Health Plans SW | | | | | | | | | | | |
| | High Self | V21 | 75.15 | 80.12 | 60.09 | 20.03 | 1.24 | 162.83 | 173.59 | 130.19 | 43.40 | 2.69 |
| | High Family | V22 | 174.42 | 191.73 | 142.27 | 49.46 | 5.86 | 377.91 | 415.42 | 308.25 | 107.17 | 12.69 |
| TX | NYLCARE HP of the Gulf Coast | | | | | | | | | | | |
| | High Self | UM1 | 78.19 | 85.38 | 64.04 | 21.34 | 1.79 | 169.41 | 184.99 | 138.74 | 46.25 | 3.90 |
| | High Family | UM2 | 203.31 | 222.03 | 142.27 | 79.76 | 11.39 | 440.51 | 481.07 | 308.25 | 172.82 | 24.68 |
| TX | NYLCARE HP of the Gulf Coast | | | | | | | | | | | |
| | High Self | ZE1 | 63.97 | 64.88 | 48.66 | 16.22 | 0.23 | 138.60 | 140.57 | 105.43 | 35.14 | 0.49 |
| | High Family | ZE2 | 166.49 | 168.83 | 126.62 | 42.21 | 0.59 | 360.73 | 365.80 | 274.35 | 91.45 | 1.27 |
| TX | NYLCARE HP of the Gulf Coast | | | | | | | | | | | |
| | High Self | ZF1 | 80.45 | 83.62 | 62.72 | 20.90 | 0.79 | 174.31 | 181.18 | 135.89 | 45.29 | 1.71 |
| | High Family | ZF2 | 179.90 | 186.97 | 140.23 | 46.74 | 1.77 | 389.78 | 405.10 | 303.83 | 101.27 | 3.83 |
| TX | PacifiCare of Texas | | | | | | | | | | | |
| | High Self | GF1 | 61.63 | 68.56 | 51.42 | 17.14 | 1.73 | 133.53 | 148.55 | 111.41 | 37.14 | 3.76 |
| | High Family | GF2 | 171.94 | 182.06 | 136.55 | 45.51 | 2.53 | 372.54 | 394.46 | 295.85 | 98.61 | 5.48 |
| TX | PCA Health Plans of Texas | | | | | | | | | | | |
| | High Self | TW1 | 61.93 | 67.45 | 50.59 | 16.86 | 1.38 | 134.18 | 146.14 | 109.61 | 36.53 | 2.99 |
| | High Family | TW2 | 169.69 | 184.83 | 138.62 | 46.21 | 3.79 | 367.66 | 400.47 | 300.35 | 100.12 | 8.21 |
| TX | Principal Health Care of TX | | | | | | | | | | | |
| | High Self | T51 | 82.04 | 89.98 | 65.96 | 24.02 | 3.51 | 177.75 | 194.96 | 142.91 | 52.05 | 7.61 |
| | High Family | T52 | 209.20 | 229.44 | 142.27 | 87.17 | 12.91 | 453.27 | 497.12 | 308.25 | 188.87 | 27.97 |
| TX | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | 6P1 | 74.50 | 74.50 | 55.88 | 18.62 | 0.00 | 161.42 | 161.42 | 121.07 | 40.35 | 0.00 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 59

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | | | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|----------------------------|-----|----------|--------|--------|--------|-------|----------|--------|--------|--------|-------|
| TX | High Family | 6P2 | 163.92 | 163.92 | 122.94 | 40.98 | 0.00 | 355.16 | 355.16 | 266.37 | 88.79 | 0.00 |
| | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | UN1 | 56.62 | 56.62 | 42.47 | 14.15 | 0.00 | 122.68 | 122.68 | 92.01 | 30.67 | 0.00 |
| | High Family | UN2 | 152.63 | 152.63 | 114.47 | 38.16 | 0.00 | 330.70 | 330.70 | 248.03 | 82.67 | 0.00 |
| TX | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | UP1 | 60.94 | 65.98 | 49.49 | 16.49 | 1.26 | 132.04 | 142.96 | 107.22 | 35.74 | 2.73 |
| | High Family | UP2 | 177.22 | 191.84 | 142.27 | 49.57 | 5.27 | 383.98 | 415.65 | 308.25 | 107.40 | 11.41 |
| TX | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | VX1 | 63.49 | 69.85 | 52.39 | 17.46 | 1.59 | 137.56 | 151.34 | 113.51 | 37.83 | 3.44 |
| | High Family | VX2 | 165.00 | 181.50 | 136.13 | 45.37 | 4.12 | 357.50 | 393.25 | 294.94 | 98.31 | 8.94 |
| TX | Scott and White | | | | | | | | | | | |
| | High Self | UF1 | 93.90 | 99.91 | 65.96 | 33.95 | 2.88 | 203.45 | 216.47 | 142.91 | 73.56 | 6.24 |
| | High Family | UF2 | 243.70 | 259.20 | 142.27 | 116.93 | 8.17 | 528.02 | 561.60 | 308.25 | 253.35 | 17.70 |
| TX | United HealthCare of Texas | | | | | | | | | | | |
| | High Self | U31 | 74.72 | 82.40 | 61.80 | 20.60 | 1.92 | 161.89 | 178.53 | 133.90 | 44.63 | 4.16 |
| | High Family | U32 | 189.10 | 208.53 | 142.27 | 66.26 | 12.10 | 409.72 | 451.82 | 308.25 | 143.57 | 26.22 |
| TX | WellChoice | | | | | | | | | | | |
| | High Self | 3Z1 | New Plan | 62.40 | 46.80 | 15.60 | N/A | New Plan | 135.20 | 101.40 | 33.80 | N/A |
| | High Family | 3Z2 | New Plan | 162.24 | 121.68 | 40.56 | N/A | New Plan | 351.52 | 263.64 | 87.88 | N/A |
| UT | IHC | | | | | | | | | | | |
| | High Self | 6S1 | 87.38 | 94.52 | 65.96 | 28.56 | 4.01 | 189.32 | 204.79 | 142.91 | 61.88 | 8.69 |
| | High Family | 6S2 | 198.61 | 214.53 | 142.27 | 72.26 | 8.59 | 430.32 | 464.82 | 308.25 | 156.57 | 18.62 |
| UT | PacifiCare of Utah | | | | | | | | | | | |
| | High Self | KU1 | 63.48 | 63.59 | 47.69 | 15.90 | 0.03 | 137.54 | 137.78 | 103.34 | 34.44 | 0.06 |
| | High Family | KU2 | 167.35 | 169.08 | 126.81 | 42.27 | 0.43 | 362.59 | 366.34 | 274.76 | 91.58 | 0.93 |
| VT | Community Health Plan | | | | | | | | | | | |
| | High Self | 8M1 | 83.47 | 73.03 | 54.77 | 18.26 | -2.61 | 180.85 | 158.23 | 118.67 | 39.56 | -5.65 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 60

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-----------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| VT | High Family | 8M2 | 225.36 | 189.88 | 142.27 | 47.61 | -42.81 | 488.28 | 411.41 | 308.25 | 103.16 | -92.75 |
| | Harvard Community Hlth Plan | | | | | | | | | | | |
| | High Self | 681 | 92.01 | 102.28 | 65.96 | 36.32 | 7.14 | 199.36 | 221.61 | 142.91 | 78.70 | 15.47 |
| | High Family | 682 | 243.85 | 271.04 | 142.27 | 128.77 | 19.86 | 528.34 | 587.25 | 308.25 | 279.00 | 43.03 |
| VT | MVP Health Plan | | | | | | | | | | | |
| | High Self | VW1 | 70.46 | 79.96 | 59.97 | 19.99 | 2.38 | 152.66 | 173.25 | 129.94 | 43.31 | 5.15 |
| | High Family | VW2 | 176.18 | 199.95 | 142.27 | 57.68 | 13.64 | 381.72 | 433.23 | 308.25 | 124.98 | 29.55 |
| VA | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | V81 | 79.84 | 95.51 | 65.96 | 29.55 | 9.59 | 172.99 | 206.94 | 142.91 | 64.03 | 20.78 |
| | High Family | V82 | 175.38 | 233.42 | 142.27 | 91.15 | 47.31 | 379.99 | 505.74 | 308.25 | 197.49 | 102.49 |
| VA | Aetna U.S. Healthcare | | | | | | | | | | | |
| | High Self | Z11 | 76.04 | 82.25 | 61.69 | 20.56 | 1.55 | 164.75 | 178.21 | 133.66 | 44.55 | 3.36 |
| | High Family | Z12 | 167.47 | 206.22 | 142.27 | 63.95 | 22.08 | 362.85 | 446.81 | 308.25 | 138.56 | 47.85 |
| VA | CapitalCare | | | | | | | | | | | |
| | High Self | 2G1 | 64.63 | 73.48 | 55.11 | 18.37 | 2.21 | 140.03 | 159.21 | 119.41 | 39.80 | 4.79 |
| | High Family | 2G2 | 177.73 | 202.07 | 142.27 | 59.80 | 15.37 | 385.08 | 437.82 | 308.25 | 129.57 | 33.30 |
| VA | CIGNA HealthCare of VA | | | | | | | | | | | |
| | High Self | W21 | 89.64 | 77.56 | 58.17 | 19.39 | -7.42 | 194.22 | 168.05 | 126.04 | 42.01 | -16.08 |
| | High Family | W22 | 202.71 | 172.91 | 129.68 | 43.23 | -24.54 | 439.21 | 374.64 | 280.98 | 93.66 | -53.18 |
| VA | CIGNA HealthCare of VA | | | | | | | | | | | |
| | High Self | W31 | 88.16 | 81.31 | 60.98 | 20.33 | -5.00 | 191.01 | 176.17 | 132.13 | 44.04 | -10.84 |
| | High Family | W32 | 198.37 | 183.05 | 137.29 | 45.76 | -17.67 | 429.80 | 396.61 | 297.46 | 99.15 | -38.28 |
| VA | CIGNA HlthCare Mid-Atlantic | | | | | | | | | | | |
| | High Self | XF1 | 77.81 | 57.76 | 43.32 | 14.44 | -5.01 | 168.59 | 125.15 | 93.86 | 31.29 | -10.86 |
| | High Family | XF2 | 210.17 | 163.92 | 122.94 | 40.98 | -34.25 | 455.37 | 355.16 | 266.37 | 88.79 | -74.21 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 61

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|--------|--------|--------|-------|-------|--------|--------|--------|--------|-------|
| VA | George Washington Univ HP | | | | | | | | | | | |
| | High Self | E51 | 94.91 | 104.49 | 65.96 | 38.53 | 6.45 | 205.64 | 226.40 | 142.91 | 83.49 | 13.98 |
| | High Family | E52 | 204.81 | 228.80 | 142.27 | 86.53 | 16.66 | 443.76 | 495.73 | 308.25 | 187.48 | 36.09 |
| | Standard Self | E54 | 63.09 | 68.26 | 51.20 | 17.06 | 1.29 | 136.70 | 147.90 | 110.93 | 36.97 | 2.80 |
| | Standard Family | E55 | 135.04 | 148.80 | 111.60 | 37.20 | 3.44 | 292.59 | 322.40 | 241.80 | 80.60 | 7.45 |
| VA | Healthkeepers | | | | | | | | | | | |
| | High Self | X81 | 70.53 | 71.97 | 53.98 | 17.99 | 0.36 | 152.82 | 155.94 | 116.96 | 38.98 | 0.78 |
| | High Family | X82 | 184.02 | 188.13 | 141.10 | 47.03 | -2.05 | 398.71 | 407.62 | 305.72 | 101.90 | -4.44 |
| VA | Heritage National Healthplan | | | | | | | | | | | |
| | High Self | 4T1 | 79.59 | 86.32 | 64.74 | 21.58 | 1.68 | 172.45 | 187.03 | 140.27 | 46.76 | 3.65 |
| | High Family | 4T2 | 175.17 | 189.99 | 142.27 | 47.72 | 3.93 | 379.54 | 411.65 | 308.25 | 103.40 | 8.52 |
| VA | Kaiser Permanente | | | | | | | | | | | |
| | High Self | E31 | 71.51 | 79.05 | 59.29 | 19.76 | 1.88 | 154.94 | 171.28 | 128.46 | 42.82 | 4.09 |
| | High Family | E32 | 176.44 | 195.22 | 142.27 | 52.95 | 8.84 | 382.29 | 422.98 | 308.25 | 114.73 | 19.16 |
| VA | MD-IPA | | | | | | | | | | | |
| | High Self | JP1 | 73.64 | 79.09 | 59.32 | 19.77 | 1.36 | 159.55 | 171.36 | 128.52 | 42.84 | 2.95 |
| | High Family | JP2 | 176.75 | 189.82 | 142.27 | 47.55 | 3.36 | 382.96 | 411.28 | 308.25 | 103.03 | 7.29 |
| VA | NYLCare/Mid-Atlantic | | | | | | | | | | | |
| | High Self | JN1 | 74.08 | 90.06 | 65.96 | 24.10 | 5.58 | 160.51 | 195.13 | 142.91 | 52.22 | 12.09 |
| | High Family | JN2 | 174.08 | 211.65 | 142.27 | 69.38 | 25.86 | 377.17 | 458.58 | 308.25 | 150.33 | 56.04 |
| | Standard Self | JN4 | 55.16 | 61.36 | 46.02 | 15.34 | 1.55 | 119.51 | 132.95 | 99.71 | 33.24 | 3.36 |
| | Standard Family | JN5 | 129.62 | 144.19 | 108.14 | 36.05 | 3.65 | 280.84 | 312.41 | 234.31 | 78.10 | 7.89 |
| VA | OPTIMA Health Plan | | | | | | | | | | | |
| | High Self | V91 | 76.90 | 94.02 | 65.96 | 28.06 | 8.84 | 166.62 | 203.71 | 142.91 | 60.80 | 19.15 |
| | High Family | V92 | 195.03 | 233.59 | 142.27 | 91.32 | 31.23 | 422.57 | 506.11 | 308.25 | 197.86 | 67.66 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 62

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|----------------------------|-----|----------|--------|--------|--------|--------|----------|--------|--------|--------|--------|
| VA | PARTNERS NHP of NC | | | | | | | | | | | |
| | High Self | EQ1 | 78.84 | 83.82 | 62.87 | 20.95 | 1.24 | 170.82 | 181.61 | 136.21 | 45.40 | 2.70 |
| | High Family | EQ2 | 177.40 | 188.58 | 141.44 | 47.14 | 2.79 | 384.37 | 408.59 | 306.44 | 102.15 | 6.06 |
| VA | Priority Health Care, Inc. | | | | | | | | | | | |
| | High Self | W71 | 70.82 | 74.38 | 55.79 | 18.59 | 0.89 | 153.44 | 161.16 | 120.87 | 40.29 | 1.93 |
| | High Family | W72 | 191.24 | 202.77 | 142.27 | 60.50 | 4.20 | 414.35 | 439.34 | 308.25 | 131.09 | 9.11 |
| VA | Prudential HealthCare HMO | | | | | | | | | | | |
| | High Self | V61 | 61.53 | 61.09 | 45.82 | 15.27 | -0.11 | 133.32 | 132.36 | 99.27 | 33.09 | -0.24 |
| | High Family | V62 | 166.13 | 164.93 | 123.70 | 41.23 | -0.30 | 359.95 | 357.35 | 268.01 | 89.34 | -0.65 |
| VA | QualChoice of Virginia | | | | | | | | | | | |
| | High Self | 2Q1 | 68.52 | 81.70 | 61.28 | 20.42 | 3.29 | 148.46 | 177.02 | 132.77 | 44.25 | 7.14 |
| | High Family | 2Q2 | 176.91 | 212.19 | 142.27 | 69.92 | 25.69 | 383.31 | 459.75 | 308.25 | 151.50 | 55.67 |
| VA | Southern Health Services | | | | | | | | | | | |
| | High Self | 5S1 | 69.66 | 62.69 | 47.02 | 15.67 | -1.74 | 150.93 | 135.83 | 101.87 | 33.96 | -3.77 |
| | High Family | 5S2 | 188.07 | 169.27 | 126.95 | 42.32 | -10.81 | 407.49 | 366.75 | 275.06 | 91.69 | -23.43 |
| WA | First Choice Health Plan | | | | | | | | | | | |
| | High Self | 5G1 | New Plan | 74.62 | 55.97 | 18.65 | N/A | New Plan | 161.68 | 121.26 | 40.42 | N/A |
| | High Family | 5G2 | New Plan | 193.75 | 142.27 | 51.48 | N/A | New Plan | 419.79 | 308.25 | 111.54 | N/A |
| WA | Group Health Coop | | | | | | | | | | | |
| | High Self | 541 | 84.96 | 86.87 | 65.15 | 21.72 | -0.41 | 184.08 | 188.22 | 141.17 | 47.05 | -0.90 |
| | High Family | 542 | 200.89 | 205.16 | 142.27 | 62.89 | -3.06 | 435.26 | 444.51 | 308.25 | 136.26 | -6.63 |
| | Standard Self | 544 | 64.68 | 66.22 | 49.67 | 16.55 | 0.38 | 140.14 | 143.48 | 107.61 | 35.87 | 0.84 |
| | Standard Family | 545 | 149.74 | 153.29 | 114.97 | 38.32 | 0.89 | 324.44 | 332.13 | 249.10 | 83.03 | 1.92 |
| WA | Group Health Northwest | | | | | | | | | | | |
| | High Self | VR1 | 79.14 | 95.18 | 65.96 | 29.22 | 9.44 | 171.47 | 206.22 | 142.91 | 63.31 | 20.44 |
| | High Family | VR2 | 201.83 | 242.57 | 142.27 | 100.30 | 33.41 | 437.30 | 525.57 | 308.25 | 217.32 | 72.39 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 63

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| WA | Health Maintenance of Oregon | | | | | | | | | | | |
| | High Self | 6B1 | 82.11 | 83.14 | 62.36 | 20.78 | 0.25 | 177.91 | 180.14 | 135.11 | 45.03 | 0.55 |
| | High Family | 6B2 | 181.79 | 184.06 | 138.05 | 46.01 | -0.84 | 393.88 | 398.80 | 299.10 | 99.70 | -1.81 |
| WA | Kaiser Permanente | | | | | | | | | | | |
| | High Self | 571 | 84.57 | 92.80 | 65.96 | 26.84 | 5.10 | 183.24 | 201.07 | 142.91 | 58.16 | 11.05 |
| | High Family | 572 | 195.04 | 212.35 | 142.27 | 70.08 | 9.98 | 422.59 | 460.09 | 308.25 | 151.84 | 21.62 |
| | Standard Self | 574 | 75.77 | 80.70 | 60.53 | 20.17 | 1.23 | 164.17 | 174.85 | 131.14 | 43.71 | 2.67 |
| | Standard Family | 575 | 162.15 | 185.58 | 139.19 | 46.39 | 5.85 | 351.33 | 402.09 | 301.57 | 100.52 | 12.69 |
| WA | Kitsap Physicians Service | | | | | | | | | | | |
| | High Self | VT1 | 158.02 | 158.02 | 65.96 | 92.06 | -3.13 | 342.38 | 342.38 | 142.91 | 199.47 | -6.78 |
| | High Family | VT2 | 337.98 | 337.98 | 142.27 | 195.71 | -7.33 | 732.29 | 732.29 | 308.25 | 424.04 | -15.88 |
| | Standard Self | VT4 | 85.56 | 90.72 | 65.96 | 24.76 | 2.03 | 185.38 | 196.56 | 142.91 | 53.65 | 4.40 |
| | Standard Family | VT5 | 186.96 | 198.23 | 142.27 | 55.96 | 3.94 | 405.08 | 429.50 | 308.25 | 121.25 | 8.54 |
| WA | NYLCare Northwest | | | | | | | | | | | |
| | High Self | 8N1 | 87.56 | 78.87 | 59.15 | 19.72 | -5.01 | 189.71 | 170.89 | 128.17 | 42.72 | -10.86 |
| | High Family | 8N2 | 206.59 | 190.26 | 142.27 | 47.99 | -23.66 | 447.61 | 412.23 | 308.25 | 103.98 | -51.26 |
| WA | PacifiCare of Oregon | | | | | | | | | | | |
| | High Self | SS1 | 82.88 | 81.73 | 61.30 | 20.43 | -0.29 | 179.57 | 177.08 | 132.81 | 44.27 | -0.62 |
| | High Family | SS2 | 187.95 | 181.56 | 136.17 | 45.39 | -7.62 | 407.23 | 393.38 | 295.04 | 98.34 | -16.52 |
| WA | PacifiCare of Washington | | | | | | | | | | | |
| | High Self | WB1 | 61.96 | 64.51 | 48.38 | 16.13 | 0.64 | 134.25 | 139.77 | 104.83 | 34.94 | 1.38 |
| | High Family | WB2 | 160.28 | 166.91 | 125.18 | 41.73 | 1.66 | 347.27 | 361.64 | 271.23 | 90.41 | 3.59 |
| WA | QualMed Oregon Health Plan | | | | | | | | | | | |
| | High Self | AF1 | 86.22 | 86.84 | 65.13 | 21.71 | -1.68 | 186.81 | 188.15 | 141.11 | 47.04 | -3.64 |
| | High Family | AF2 | 210.37 | 212.75 | 142.27 | 70.48 | -4.95 | 455.80 | 460.96 | 308.25 | 152.71 | -10.72 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 64

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|------------------------------|-----|----------|--------|--------|-------|-------|----------|--------|--------|--------|-------|
| WA | QualMed WA Health Plan | | | | | | | | | | | |
| | High Self | TM1 | 80.46 | 84.14 | 63.11 | 21.03 | 0.92 | 174.33 | 182.30 | 136.73 | 45.57 | 1.99 |
| | High Family | TM2 | 200.78 | 204.10 | 142.27 | 61.83 | -4.01 | 435.02 | 442.22 | 308.25 | 133.97 | -8.68 |
| WA | SelectCare | | | | | | | | | | | |
| | High Self | SD1 | 73.00 | 79.98 | 59.99 | 19.99 | 1.74 | 158.17 | 173.29 | 129.97 | 43.32 | 3.78 |
| | High Family | SD2 | 176.97 | 193.88 | 142.27 | 51.61 | 7.37 | 383.44 | 420.07 | 308.25 | 111.82 | 15.96 |
| WV | Advantage Health Plan-OH/WVA | | | | | | | | | | | |
| | High Self | QJ1 | 60.15 | 74.15 | 55.61 | 18.54 | 3.50 | 130.33 | 160.66 | 120.50 | 40.16 | 7.58 |
| | High Family | QJ2 | 155.69 | 181.64 | 136.23 | 45.41 | 6.49 | 337.33 | 393.55 | 295.16 | 98.39 | 14.06 |
| WV | Carelink Health Plans | | | | | | | | | | | |
| | High Self | 4C1 | 85.27 | 95.83 | 65.96 | 29.87 | 7.43 | 184.75 | 207.63 | 142.91 | 64.72 | 16.10 |
| | High Family | 4C2 | 191.86 | 215.58 | 142.27 | 73.31 | 16.39 | 415.70 | 467.09 | 308.25 | 158.84 | 35.51 |
| WV | Health Plan Upper OH Valley | | | | | | | | | | | |
| | High Self | U41 | 82.96 | 96.17 | 65.96 | 30.21 | 9.47 | 179.75 | 208.37 | 142.91 | 65.46 | 20.52 |
| | High Family | U42 | 207.25 | 240.42 | 142.27 | 98.15 | 25.84 | 449.04 | 520.91 | 308.25 | 212.66 | 55.99 |
| WV | HealthAssurance HMO | | | | | | | | | | | |
| | High Self | 6L1 | New Plan | 86.83 | 65.12 | 21.71 | N/A | New Plan | 188.13 | 141.10 | 47.03 | N/A |
| | High Family | 6L2 | New Plan | 219.19 | 142.27 | 76.92 | N/A | New Plan | 474.91 | 308.25 | 166.66 | N/A |
| WV | PrimeONE | | | | | | | | | | | |
| | High Self | 9W1 | 78.25 | 85.55 | 64.16 | 21.39 | 1.83 | 169.54 | 185.36 | 139.02 | 46.34 | 3.96 |
| | High Family | 9W2 | 198.19 | 216.67 | 142.27 | 74.40 | 11.15 | 429.41 | 469.45 | 308.25 | 161.20 | 24.16 |
| WV | SuperBlue HMO | | | | | | | | | | | |
| | High Self | 8T1 | New Plan | 85.43 | 64.07 | 21.36 | N/A | New Plan | 185.10 | 138.83 | 46.27 | N/A |
| | High Family | 8T2 | New Plan | 214.92 | 142.27 | 72.65 | N/A | New Plan | 465.66 | 308.25 | 157.41 | N/A |
| WI | Compcare Health Services | | | | | | | | | | | |
| | High Self | 691 | 82.88 | 86.16 | 64.62 | 21.54 | 0.82 | 179.57 | 186.68 | 140.01 | 46.67 | 1.78 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 65

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|--------------------------------|-----|----------|--------|--------|-------|-------|----------|--------|--------|--------|-------|
| WI | High Family | 692 | 214.70 | 223.19 | 142.27 | 80.92 | 1.16 | 465.18 | 483.58 | 308.25 | 175.33 | 2.52 |
| | Compcare Health Services | | | | | | | | | | | |
| | High Self | 6X1 | New Area | 82.19 | 61.64 | 20.55 | N/A | New Area | 178.08 | 133.56 | 44.52 | N/A |
| | High Family | 6X2 | New Area | 212.92 | 142.27 | 70.65 | N/A | New Area | 461.33 | 308.25 | 153.08 | N/A |
| WI | DEAN HEALTH PLAN | | | | | | | | | | | |
| | High Self | WD1 | 72.86 | 79.14 | 59.36 | 19.78 | 1.57 | 157.86 | 171.47 | 128.60 | 42.87 | 3.41 |
| | High Family | WD2 | 196.75 | 213.70 | 142.27 | 71.43 | 9.62 | 426.29 | 463.02 | 308.25 | 154.77 | 20.85 |
| WI | Family Health Plan | | | | | | | | | | | |
| | High Self | WH1 | 87.36 | 91.03 | 65.96 | 25.07 | 0.54 | 189.28 | 197.23 | 142.91 | 54.32 | 1.17 |
| | High Family | WH2 | 226.58 | 236.09 | 142.27 | 93.82 | 2.18 | 490.92 | 511.53 | 308.25 | 203.28 | 4.73 |
| WI | Green Bay Hlth Protection Plan | | | | | | | | | | | |
| | High Self | 4L1 | New Plan | 85.98 | 64.49 | 21.49 | N/A | New Plan | 186.29 | 139.72 | 46.57 | N/A |
| | High Family | 4L2 | New Plan | 216.17 | 142.27 | 73.90 | N/A | New Plan | 468.37 | 308.25 | 160.12 | N/A |
| WI | Group Health Coop | | | | | | | | | | | |
| | High Self | WJ1 | 75.44 | 78.46 | 58.85 | 19.61 | 0.75 | 163.45 | 170.00 | 127.50 | 42.50 | 1.64 |
| | High Family | WJ2 | 201.21 | 209.26 | 142.27 | 66.99 | 0.72 | 435.96 | 453.40 | 308.25 | 145.15 | 1.56 |
| WI | Group Hlth Coop/Eau Claire | | | | | | | | | | | |
| | High Self | WT1 | 83.32 | 85.58 | 64.19 | 21.39 | 0.56 | 180.53 | 185.42 | 139.07 | 46.35 | 1.22 |
| | High Family | WT2 | 215.07 | 220.80 | 142.27 | 78.53 | -1.60 | 465.99 | 478.40 | 308.25 | 170.15 | -3.47 |
| WI | HealthPartners Classic | | | | | | | | | | | |
| | High Self | 531 | 70.25 | 75.82 | 56.87 | 18.95 | 1.39 | 152.21 | 164.28 | 123.21 | 41.07 | 3.02 |
| | High Family | 532 | 193.19 | 201.30 | 142.27 | 59.03 | 0.78 | 418.58 | 436.15 | 308.25 | 127.90 | 1.69 |
| | Standard Self | 534 | 55.10 | 60.91 | 45.68 | 15.23 | 1.46 | 119.38 | 131.97 | 98.98 | 32.99 | 3.15 |
| | Standard Family | 535 | 151.50 | 161.68 | 121.26 | 40.42 | 2.55 | 328.25 | 350.31 | 262.73 | 87.58 | 5.52 |
| WI | HealthPartners Health Plan | | | | | | | | | | | |
| | High Self | HQ1 | 82.50 | 84.69 | 63.52 | 21.17 | 0.55 | 178.75 | 183.50 | 137.63 | 45.87 | 1.18 |
| | High Family | HQ2 | 206.26 | 211.72 | 142.27 | 69.45 | -1.87 | 446.90 | 458.73 | 308.25 | 150.48 | -4.05 |

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

Page - 66

| Health Maintenance Organization Plans (HMOs) Location -- Plan Option -- Enrollment Code | 1997 total premium | 1998 Biweekly premium rates | | | | 1997 total premium | 1998 Monthly premium rates | | | |
|--|--------------------------|-----------------------------|---------------|---------------|-------------------------------|--------------------------|----------------------------|----------------|---------------|-------------------------------|
| | | Total premium | Gov't pays | Empl. pays | Change in empl. payment | | Total premium | Gov't. pays | Empl. pays | Change in empl. payment |

[NOTE: If you do not find your plan in this HMO section, check the POS section.]

| | | | | | | | | | | | | |
|----|-------------------------------|-----|----------|--------|--------|--------|--------|----------|--------|--------|--------|--------|
| WI | Humana Wisconsin Hlth Org. | | | | | | | | | | | |
| | High Self | X11 | 88.40 | 93.04 | 65.96 | 27.08 | 1.51 | 191.53 | 201.59 | 142.91 | 58.68 | 3.28 |
| | High Family | X12 | 220.56 | 232.12 | 142.27 | 89.85 | 4.23 | 477.88 | 502.93 | 308.25 | 194.68 | 9.17 |
| WI | Maxicare Wisconsin | | | | | | | | | | | |
| | High Self | WG1 | 84.61 | 86.37 | 64.78 | 21.59 | -0.19 | 183.32 | 187.14 | 140.36 | 46.78 | -0.41 |
| | High Family | WG2 | 215.90 | 220.40 | 142.27 | 78.13 | -2.83 | 467.78 | 477.53 | 308.25 | 169.28 | -6.13 |
| WI | No. Ctrl Hlth Protection Plan | | | | | | | | | | | |
| | High Self | 8R1 | New Plan | 98.27 | 65.96 | 32.31 | N/A | New Plan | 212.92 | 142.91 | 70.01 | N/A |
| | High Family | 8R2 | New Plan | 246.98 | 142.27 | 104.71 | N/A | New Plan | 535.12 | 308.25 | 226.87 | N/A |
| WI | Physicians Plus HMO | | | | | | | | | | | |
| | High Self | 7P1 | 100.95 | 93.32 | 65.96 | 27.36 | -10.76 | 218.73 | 202.19 | 142.91 | 59.28 | -23.32 |
| | High Family | 7P2 | 242.52 | 240.73 | 142.27 | 98.46 | -9.12 | 525.46 | 521.58 | 308.25 | 213.33 | -19.76 |
| WI | PrimeCare Health Plan, Inc. | | | | | | | | | | | |
| | High Self | WK1 | 100.06 | 95.89 | 65.96 | 29.93 | -7.30 | 216.80 | 207.76 | 142.91 | 64.85 | -15.82 |
| | High Family | WK2 | 225.13 | 215.75 | 142.27 | 73.48 | -16.71 | 487.78 | 467.46 | 308.25 | 159.21 | -36.20 |
| WI | Unity Health Plans | | | | | | | | | | | |
| | High Self | W41 | 81.93 | 84.39 | 63.29 | 21.10 | 0.62 | 177.52 | 182.85 | 137.14 | 45.71 | 1.33 |
| | High Family | W42 | 215.42 | 215.42 | 142.27 | 73.15 | -7.33 | 466.74 | 466.74 | 308.25 | 158.49 | -15.88 |
| WI | Valley Health Plan | | | | | | | | | | | |
| | High Self | VH1 | 94.49 | 97.47 | 65.96 | 31.51 | -0.15 | 204.73 | 211.19 | 142.91 | 68.28 | -0.32 |
| | High Family | VH2 | 241.89 | 249.54 | 142.27 | 107.27 | 0.32 | 524.10 | 540.67 | 308.25 | 232.42 | 0.69 |