

2016 Rates

ACDHP Plan

(Advantage Consumer Directed Health Plan)

**2016 Health Rates for ACDHP
 Advantage Consumer Directed Health Plan
 Full ER Contribution**

Union Codes – 213-217-219-220-221-222-223-308-309-INS

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
CDHP Blue Cross	497.56	469.36	28.20	1028.32	864.08	164.24	1525.88	1333.44	192.44
CDHP HealthPartners	497.56	469.36	28.20	1028.32	864.08	164.24	1525.88	1333.44	192.44
CDHP PreferredOne	497.56	469.36	28.20	1028.32	864.08	164.24	1525.88	1333.44	192.44

Semi-Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
CDHP Blue Cross	248.70	234.68	14.10	514.16	432.04	82.12	762.94	666.72	96.22
CDHP HealthPartners	248.70	234.68	14.10	514.16	432.04	82.12	762.94	666.72	96.22
CDHP PreferredOne	248.70	234.68	14.10	514.16	432.04	82.12	762.94	666.72	96.22

HSA Contribution	Semi-Monthly ER paid		
	Health Plan	Single	Dependent
CDHP Blue Cross	20.83	20.83	41.66
CDHP HealthPartners	20.83	20.83	41.66
CDHP PreferredOne	20.83	20.83	41.66

**2016 Health Rates for ACDHP
 Advantage Consumer Directed Health Plan
 75.00% ER Contribution**

Union Codes – 213-217-219-220-221-222-223-308-309-INS

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
CDHP Blue Cross	497.56	352.02	145.54	1028.32	648.06	380.26	1525.88	1000.08	525.80
CDHP HealthPartners	497.56	352.02	145.54	1028.32	648.06	380.26	1525.88	1000.08	525.80
CDHP PreferredOne	497.56	352.02	145.54	1028.32	648.06	380.26	1525.88	1000.08	525.80

Semi-Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
CDHP Blue Cross	248.78	176.01	72.77	514.16	324.03	190.13	762.94	500.04	262.90
CDHP HealthPartners	248.78	176.01	72.77	514.16	324.03	190.13	762.94	500.04	262.90
CDHP PreferredOne	248.78	176.01	72.77	514.16	324.03	190.13	762.94	500.04	262.90

HSA Contribution	Semi-Monthly ER paid		
	Health Plan	Single	Dependent
CDHP Blue Cross	15.62	15.62	31.24
CDHP HealthPartners	15.62	15.62	31.24
CDHP PreferredOne	15.62	15.62	31.24

**2016 Health Rates for ACDHP
 Advantage Consumer Directed Health Plan
 50.00% ER Contribution**

Union Codes – 213-217-219-220-221-222-223-308-309-INS

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
CDHP Blue Cross	497.56	234.68	262.88	1028.32	432.04	596.28	1525.88	666.72	859.16
CDHP HealthPartners	497.56	234.68	262.88	1028.32	432.04	596.28	1525.88	666.72	859.16
CDHP PreferredOne	497.56	234.68	262.88	1028.32	432.04	596.28	1525.88	666.72	859.16

Semi-Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
CDHP Blue Cross	248.78	117.34	131.44	514.16	216.02	298.14	762.94	333.36	429.58
CDHP HealthPartners	248.78	117.34	131.44	514.16	216.02	298.14	762.94	333.36	429.58
CDHP PreferredOne	248.78	117.34	131.44	514.16	216.02	298.14	762.94	333.36	429.58

HSA Contribution	Semi-Monthly ER paid		
	Health Plan	Single	Dependent
CDHP Blue Cross	10.41	10.42	20.83
CDHP HealthPartners	10.41	10.42	20.83
CDHP PreferredOne	10.41	10.42	20.83

**2016 Health Rates for ACDHP
 Advantage Consumer Directed Health Plan
 0.00% ER Contribution**

Union Codes – 213-217-219-220-221-222-223-308-309-INS

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
CDHP Blue Cross	497.56	0	497.56	1028.32	0	1028.32	1525.88	0	1525.88
CDHP HealthPartners	497.56	0	497.56	1028.32	0	1028.32	1525.88	0	1525.88
CDHP PreferredOne	497.56	0	497.56	1028.32	0	1028.32	1525.88	0	1525.88

Semi-Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
CDHP Blue Cross	248.78	0	248.78	514.16	0	514.16	762.94	0	762.94
CDHP HealthPartners	248.78	0	248.78	514.16	0	514.16	762.94	0	762.94
CDHP PreferredOne	248.78	0	248.78	514.16	0	514.16	762.94	0	762.94

HSA Contribution	Semi-Monthly ER paid		
	Health Plan	Single	Dependent
CDHP Blue Cross	0	0	0
CDHP HealthPartners	0	0	0
CDHP PreferredOne	0	0	0

