

**State Health Benefit Plan
Monthly Premium Rates for Members
January 1 - December 31, 2023**

Active Employees & Employees on FMLA	Employee	Employee & Child(ren)	Employee & Spouse	Employee & Family
Anthem Gold HRA	\$175.68	\$320.11	\$436.33	\$580.76
Anthem Silver HRA	\$114.32	\$215.80	\$307.47	\$408.95
Anthem Bronze HRA	\$76.58	\$151.64	\$228.22	\$303.28
Anthem HMO	\$143.03	\$264.61	\$367.76	\$489.34
UHC HMO	\$174.49	\$318.09	\$433.83	\$577.43
UHC HDHP	\$61.83	\$126.57	\$197.24	\$261.98

Above rates do not include the Tobacco Surcharge. If any covered members use any tobacco products, an additional \$80 per month will be added to the cost of coverage.