

Health Plan Change Form
Rates Effective October 1, 2018
Plan Changes Effective October 1, 2018

*****NO ACTION NECESSARY IF YOU ARE SATISFIED WITH YOUR HEALTH PLAN*****

Only complete this form if you would like to CHANGE your health plan

Active Employee Rates	
"Tenthly" Deductions (no deduction in July or August)	
Employee Contribution - Plan G1	\$86.00
Employee Contribution – Plan G2	\$59.00
Employee Contribution – Plan K	\$48.00
Employee Contribution – Plan M	\$0
Child Surcharge*	\$203.00
Spousal Surcharge	\$679.00

*after 2 child surcharges, additional children can be added to your plan as dependents with no additional surcharges

Retiree Rates	
Monthly Cost	
Retiree Contribution - Plan G1	\$72.00
Retiree Contribution – Plan G2	\$49.00
Retiree Contribution – Plan K	\$40.00
Retiree Contribution – Plan M	\$0
Child Surcharge*	\$169.00
Spousal Surcharge	\$566.00

*after 2 child surcharges, additional children can be added to your plan as dependents with no additional surcharges

PLAN CHANGE (select one):

- _____ PLAN G1
 _____ PLAN G2
 _____ PLAN K
 _____ PLAN M

SELECT EMPLOYEE TYPE (select one):

- _____ CLASSIFIED
 _____ CERTIFICATED
 _____ CONFIDENTIAL/MANAGEMENT
 _____ RETIRED

 Employee Name (print)

 Employee Name (sign)

 Date

Wondering which plan you have?

Find the Group Number on your SISC/Anthem insurance card.

You are on:

Plan G1 if... your group number ends in A, J or S
 Plan G2 if... your group number ends in B or K
 Plan K if... your group number ends in F or N
 Plan M if... your group number ends in D or M

If you don't have a card, you may call Anthem's Member Services to request your group number over the phone (and request a new card be mailed to you). Call 1-800-825-5541, enter your SSN when prompted for your ID number and ask to speak to a representative.

Return completed form to the Risk Manager's office at the District Service Center by Wednesday, May 30, 2018 @ 5pm