

**Oklahoma Higher Education Employee Insurance Group
(OKHEEI Group)
2011 Payroll Deductions**

Effective Date: January 1, 2011

The *Employee Only* premium for the BlueCrossBlueShield High Option and for the VSP Vision is 100% paid for by ECU. You will be responsible to pay the premiums for the medical & vision dependent coverage, as well as the full premium for the dental coverage.

BCBS High Option	Monthly Medical Cost	Employer's Monthly Cost	Employee Monthly Cost
Employee Only	\$472.80	\$472.80	\$ 0.00
Employee + Children	\$851.00	\$ 0.00	\$378.20
Employee + Child	\$661.90	\$ 0.00	\$189.10
Employee + Spouse	\$969.20	\$ 36.00	\$460.40
Employee + Family	\$1,347.50	\$ 36.00	\$838.70

BCBS Basic Option	Monthly Medical Cost	Employer's Monthly Cost	Employee Monthly Cost
Employee Only	\$356.20	\$356.20	\$0.00
Employee + Children	\$641.10	\$0.00	\$284.90
Employee + Child	\$498.60	\$0.00	\$142.40
Employee + Spouse	\$730.20	\$36.00	\$338.00
Employee + Family	\$1015.10	\$36.00	\$622.90

BCBS Dental	Monthly Medical Cost	Employer's Monthly Cost	Employee Monthly Cost
Employee Only	\$34.90	\$0.00	\$34.90
Employee + Children	\$62.80	\$0.00	\$62.80
Employee + Child	\$48.80	\$0.00	\$48.80
Employee + Spouse	\$71.50	\$0.00	\$71.50
Employee + Family	\$99.40	\$0.00	\$99.40

VSP Vision	Monthly Medical Cost	Employer's Monthly Cost	Employee Monthly Cost
Employee Only	\$7.14	\$7.14	\$0.00
Employee + Children	\$15.26	\$0.00	\$8.12
Employee + Child	\$13.98	\$0.00	\$6.84
Employee + Spouse	\$14.26	\$0.00	\$7.12
Employee + Family	\$24.38	\$0.00	\$17.24

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