

AFSCME 2018 RATES

<i>12-MONTH</i>	Plan	
	PPO	QHDHP
Individual	66.00	16.00
Family	145.00	53.00
Employee/Partner	145.00	53.00
Parent/Child(ren)	119.00	34.00

<i>10-MONTH</i>	Plan	
	PPO	QHDHP
Individual	79.20	19.20
Family	174.00	63.60
Employee/Partner	174.00	63.60
Parent/Child(ren)	142.80	40.80

Note: spouses and domestic partners who are eligible for comparable health insurance coverage through their employer will be eligible for coverage under the District's health insurance only if the employee pays the full premium cost differential.