

LPB Monthly Premium Rates July 1, 2016 - June 30, 2017

0% PREMIUM LOAD

Provider	Employee	Employee + Spouse	Employee + Children	Family
Admin. Fee	\$1.30	\$1.30	\$1.30	\$1.30
Presbyterian - HMO	\$487.14	\$1,096.09	\$876.86	\$1,437.11
BCBS NM - HMO	\$487.14	\$1,096.09	\$876.86	\$1,437.11
BCBS NM - PPO	\$566.57	\$1,274.82	\$1,019.82	\$1,671.43
Delta Dental	\$29.29	\$58.58	\$67.40	\$87.87
Vision	\$5.43	\$10.24	\$11.93	\$15.09
Basic Life	\$4.20	\$4.20	\$4.20	\$4.20
Disability	\$9.40	\$9.40	\$9.40	\$9.40