

**OGB RATES EFFECTIVE JANUARY 1, 2018**

<b>MAGNOLIA LOCAL PLUS</b>		<b>MAGNOLIA OPEN ACCESS</b>	
	<b>RATES</b>		<b>RATES</b>
EMPLOYEE:	\$162.03	EMPLOYEE:	\$168.71
EMPLOYEE/SPOUSE:	\$541.69	EMPLOYEE/SPOUSE:	\$563.49
EMPLOYEE/CHILDREN:	\$236.21	EMPLOYEE/CHILDREN:	\$245.87
FAMILY:	\$580.89	FAMILY:	\$604.25

  

<b>PELICAN HRA</b>		<b>PELICAN H.S.A.</b>	
	<b>RATES</b>		<b>RATES</b>
EMPLOYEE:	\$98.67	EMPLOYEE:	\$54.15
EMPLOYEE/SPOUSE:	\$335.93	EMPLOYEE/SPOUSE:	\$191.43
EMPLOYEE/CHILDREN:	\$145.11	EMPLOYEE/CHILDREN:	\$81.07
FAMILY:	\$360.39	FAMILY:	\$205.57

**REQUIRED DEPENDENT VERIFICATION DOCUMENTS:**

**SPOUSE:** MARRIAGE LICENSE  
DATE OF BIRTH  
SOCIAL SECURITY CARD

**CHILDREN:** BIRTH CERTIFICATES (A COPY OF THE BIRTH LETTER WILL DO UNTIL YOU RECEIVE THE CERTIFICATE)  
SOCIAL SECURITY CARD

Documents can be emailed to : [jpharris@beau.k12.la.us](mailto:jpharris@beau.k12.la.us)

\*\*\*\*\* **REMINDER: IF YOU DECIDE TO RESIGN, YOUR INSURANCE COVERAGE WILL  
TERMINATE ON THE LAST DAY OF THE MONTH YOU RES**

PROVIDER DIRECTORIES CAN BE VIEWED AT: [www.groupbenefits.org](http://www.groupbenefits.org)