



<p><b><i>Retirement and Insurance Service          Benefits Administration Letter</i></b></p>	
<p>Number: 99-418</p>	<p>Date: December 9, 1999</p>

**Subject: Federal Employees Health Benefits (FEHB) Program: Premium Rate Change for CHP of Ohio, Enrollment Code MG**

This is to advise you that due to a re-negotiation of premiums for CHP of Ohio, enrollment code MG, the rates published in the 1999 Federal Employees Health Benefits (FEHB) Guide are incorrect. Listed below are the new rates for the plan.

<b>Guide</b>		<b>Pay Period</b>	<b>Self Only</b>	<b>Self /Family</b>
RI 70-1	Employees	Biweekly	21.79	46.37
		Monthly	47.21	100.46
RI 70-2	Postal Employees	Postal A	9.81	20.87
		Postal B	9.81	20.87
RI 70-5	TCC	102 %	192.63	409.89
	Spouse Equity	100 %	188.85	401.85
RI 70-6	OWCP	Twice Biweekly	43.58	92.74
RI 70-8	Temporary Employees	Biweekly	87.16	185.47
		Monthly	188.85	401.85

<b>Pay Period</b>	<b>Government Contributions</b>	<b>Enrollee</b>	<b>Total</b>
Biweekly (Self Only)	65.37	21.79	87.16
Biweekly (Self and Family)	139.10	46.37	185.47
Monthly (Self Only)	141.64	47.21	188.85
Monthly (Self and Family)	301.39	100.46	401.85

Agencies are asked to advise their employees of this change.

Thank you for your cooperation in this matter.



Abby L. Block, Chief  
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and Information Division