



# Health Benefits

*Together, we are working toward a healthier community*



## RETIREE RATE SHEETS 2020 AND 2021

### MEDICAL - RETIREE MONTHLY (WITHOUT MEDICARE) PREMIUM RATES

PLAN NAME & YEAR		Retiree Only	Retiree & Child or Retiree & Spouse	Retiree & Family
CAREFIRST BLUECROSS BLUESHIELD PPO	2020	\$102.00	\$183.58	\$254.98
	2021	<b>\$106.58</b>	<b>\$191.84</b>	<b>\$266.46</b>
CAREFIRST BLUECROSS BLUESHIELD EPO	2020	\$68.08	\$142.86	\$176.98
	2021	<b>\$71.14</b>	<b>\$149.28</b>	<b>\$184.94</b>
KAISER	2020	\$67.70	\$142.08	\$176.02
	2021	<b>\$71.08</b>	<b>\$149.18</b>	<b>\$184.82</b>
UNITEDHEALTHCARE PPO	2020	\$100.32	\$180.60	\$250.84
	2021	<b>\$104.84</b>	<b>\$188.72</b>	<b>\$262.14</b>
UNITEDHEALTHCARE EPO	2020	\$68.48	\$142.42	\$169.82
	2021	<b>\$71.56</b>	<b>\$148.84</b>	<b>\$177.46</b>

### MEDICAL - RETIREE MONTHLY (WITH MEDICARE) PREMIUM RATES

PLAN NAME & YEAR		Retiree Only With Medicare	Retiree + 1, 1 With Medicare	Retiree + 1, Both With Medicare	Retiree + 2, 1 With Medicare	Retiree + 2, 2 With Medicare	Retiree + 2 or More, All With Medicare	Retiree + 3 or More, at Least 1 Without Medicare
CAREFIRST BLUECROSS BLUESHIELD PPO	2020	\$51.00	\$152.98	\$102.00	\$234.56	\$203.98	\$152.98	\$254.98
	2021	<b>\$53.30</b>	<b>\$159.86</b>	<b>\$106.58</b>	<b>\$245.12</b>	<b>\$213.16</b>	<b>\$159.86</b>	<b>\$266.46</b>
CAREFIRST BLUECROSS BLUESHIELD EPO	2020	\$33.56	\$101.08	\$73.74	\$168.60	\$107.54	\$92.24	\$176.98
	2021	<b>\$35.06</b>	<b>\$105.62</b>	<b>\$77.06</b>	<b>\$176.20</b>	<b>\$112.38</b>	<b>\$96.38</b>	<b>\$184.94</b>
UNITEDHEALTHCARE PPO	2020	\$50.16	\$150.48	\$100.32	\$230.76	\$200.66	\$150.48	\$250.84
	2021	<b>\$52.42</b>	<b>\$157.26</b>	<b>\$104.84</b>	<b>\$241.14</b>	<b>\$209.68</b>	<b>\$157.26</b>	<b>\$262.14</b>
UNITEDHEALTHCARE EPO	2020	\$45.22	\$113.70	\$90.44	\$169.82	\$155.26	\$135.66	\$169.82
	2021	<b>\$47.26</b>	<b>\$118.82</b>	<b>\$94.52</b>	<b>\$177.46</b>	<b>\$162.26</b>	<b>\$141.76</b>	<b>\$177.46</b>

### PRESCRIPTION DRUG - RETIREE MONTHLY (WITHOUT MEDICARE) PREMIUM RATES

PLAN NAME & YEAR		Retiree Only	Retiree & Child	Retiree & Spouse	Retiree & Family
CVS Caremark	2020	\$55.64	\$73.96	\$92.36	\$111.30
	2021	<b>\$55.64</b>	<b>\$73.96</b>	<b>\$92.36</b>	<b>\$111.30</b>

## PRESCRIPTION DRUG - RETIREE MONTHLY (WITH MEDICARE) PREMIUM RATES

PLAN NAME & YEAR		Retiree Only with Medicare	Retiree + 1, Retiree with Medicare	Retiree + 1, Dependent with Medicare	Retiree + 1, both with Medicare	Retiree + 2, Retiree with Medicare	Retiree + 2, Dependent with Medicare	Retiree + 2, 2 with Medicare	Retiree + 2 or more, all with Medicare	Retiree + 3 or more, Retiree with Medicare	Retiree + 3 or more, 1, 2, or 3 with Medicare
		2020	2021	2020	2021	2020	2021	2020	2021	2020	2021
CVS Caremark	2020	\$40.04	\$70.38	\$73.26	\$66.38	\$95.68	\$95.68	\$81.64	\$80.08	\$95.68*	\$95.68**
	2021	<b>\$40.04</b>	<b>\$70.38</b>	<b>\$73.26</b>	<b>\$66.36</b>	<b>\$95.68</b>	<b>\$95.68</b>	<b>\$81.64</b>	<b>\$80.08</b>	<b>\$95.68*</b>	<b>\$95.68*</b>

\*FAMILY COVERAGE RETIREE W/MEDICARE AND/OR OTHER DEPENDENTS W/MEDICARE

\*\*FAMILY COVERAGE RETIREE NO MEDICARE AND 1 OR MORE DEPENDENTS W/MEDICARE

## DENTAL - RETIREE MONTHLY PREMIUM RATES

PLAN NAME & YEAR		Retiree Only	Retiree & Child	Retiree & Spouse	Retiree & Family
		2020	2021	2020	2021
DELTA DENTAL DHMO	2020	\$7.80	\$15.64	\$13.60	\$21.96
	2021	<b>\$8.14</b>	<b>\$16.34</b>	<b>\$14.22</b>	<b>\$22.94</b>
UNITED CONCORDIA DPP0	2020	\$11.64	\$22.24	\$23.26	\$43.60
	2021	<b>\$12.32</b>	<b>\$23.54</b>	<b>\$24.64</b>	<b>\$46.16</b>

Rates may vary from what appears on your paystub due to rounding.

## TERM LIFE INSURANCE PREMIUM RATES

Age of Retiree	Monthly Retiree Rates (per \$1,000)		Age of Spouse	Monthly Spouse Rates (per \$1,000)	
	2020	2021		2020	2021
Under 30	\$0.03	<b>\$0.03</b>	Under 30	\$0.09	<b>\$0.09</b>
30 to 34	\$0.04	<b>\$0.04</b>	30 to 34	\$0.10	<b>\$0.10</b>
35 to 39	\$0.05	<b>\$0.05</b>	35 to 39	\$0.12	<b>\$0.12</b>
40 to 44	\$0.08	<b>\$0.08</b>	40 to 44	\$0.18	<b>\$0.18</b>
45 to 49	\$0.13	<b>\$0.13</b>	45 to 49	\$0.28	<b>\$0.28</b>
50 to 54	\$0.20	<b>\$0.20</b>	50 to 54	\$0.42	<b>\$0.42</b>
55 to 59	\$0.37	<b>\$0.37</b>	55 to 59	\$0.65	<b>\$0.65</b>
60 to 64	\$0.52	<b>\$0.52</b>	60 to 64	\$1.00	<b>\$1.00</b>
65 to 69	\$0.77	<b>\$0.77</b>	65 to 69	\$1.45	<b>\$1.45</b>
70 to 74	\$1.38	<b>\$1.38</b>	70 to 74	\$2.28	<b>\$2.28</b>
75 to 79	\$2.06	<b>\$2.06</b>	75 to 79	\$2.28	<b>\$2.28</b>
80 and older	\$2.06	<b>\$2.06</b>	80 and older	\$2.28	<b>\$2.28</b>
Dependent Child Coverage	2020	\$0.14 per \$1,000 per month			
	2021	\$0.14 per \$1,000 per month			