

**Retiree Health Insurance Monthly Premiums**  
**For Retirees Retired Before January 15, 2012**



**PRE-MEDICARE PLANS & RATES**  
**Rates Effective: July 1, 2022 - June 30, 2023**

Note: The maximum County contribution toward monthly insurance premiums is \$960/month (pro-rated for Groups 2-6). If the County Share of your medical plan reaches the maximum subsidy for your Group, you are responsible for the balance of the medical premium and the "full pay" dental premium.

	Coverage Level	Kaiser HMO Copay Plan		Cigna OAP IN Copay Plan	Cigna OAP IN 10% Coinsurance	County Share	Cigna Choice High Deductible Health Plan	Cigna Choice High Deductible Health Plan
		Retiree Share	County Share	Retiree Share	Retiree Share		Retiree Share	County Share
<b>GROUP 1:</b> Chapter 21 20+ yrs svc; Chapter 46 25+ yrs svc  Max. Subsidy \$960	Single	\$34.56	\$ 559.66	\$ 179.82	\$ 110.68	\$ 581.00	\$ 99.00	\$ 396.00
	2 Adults	\$291.30	\$ 960.00	\$ 599.71	\$ 457.98	\$ 960.00	\$ 228.68	\$ 810.77
	Adult + Child(ren)	\$147.25	\$ 955.14	\$ 371.44	\$ 250.49	\$ 960.00	\$ 206.90	\$ 733.55
	Family	\$853.55	\$ 960.00	\$ 1,322.52	\$ 1,115.02	\$ 960.00	\$ 524.51	\$ 960.00
	1 NonMedicare + 1 Medicare	\$59.86	\$ 787.34	\$ 198.57	\$ 129.43	\$ 749.75	\$ 117.75	\$ 564.75
<b>GROUP 2:</b> Chapter 46 23-24 yrs. svc.  Max. Subsidy \$883	Single	\$ 76.57	\$ 517.65	\$ 223.40	\$ 154.26	\$ 537.43	\$ 128.70	\$ 366.30
	2 Adults	\$ 368.30	\$ 883.00	\$ 676.71	\$ 534.98	\$ 883.00	\$ 291.05	\$ 748.40
	Adult + Child(ren)	\$ 220.74	\$ 881.65	\$ 448.44	\$ 327.49	\$ 883.00	\$ 263.33	\$ 677.12
	Family	\$ 930.55	\$ 883.00	\$ 1,399.52	\$ 1,192.02	\$ 883.00	\$ 601.51	\$ 883.00
	1 NonMedicare + 1 Medicare	\$ 120.08	\$ 727.12	\$ 255.65	\$ 186.51	\$ 692.68	\$ 160.95	\$ 521.55
<b>GROUP 3:</b> Chapter 46 20-22 years of service  Max. Subsidy \$768	Single	\$ 146.50	\$ 447.72	\$ 296.02	\$ 226.88	\$ 464.80	\$ 178.20	\$ 316.80
	2 Adults	\$ 483.30	\$ 768.00	\$ 791.71	\$ 649.98	\$ 768.00	\$ 394.99	\$ 644.46
	Adult + Child(ren)	\$ 343.19	\$ 759.20	\$ 563.44	\$ 442.49	\$ 768.00	\$ 357.37	\$ 583.08
	Family	\$ 1,045.55	\$ 768.00	\$ 1,514.52	\$ 1,307.02	\$ 768.00	\$ 716.51	\$ 768.00
	1 NonMedicare + 1 Medicare	\$ 217.33	\$ 629.87	\$ 348.52	\$ 279.38	\$ 599.80	\$ 230.70	\$ 451.80
<b>GROUP 4:</b> Ch 21 & 46 15-19 years of service  Max. Subsidy \$576	Single	\$ 258.46	\$ 335.76	\$ 412.22	\$ 343.08	\$ 348.60	\$ 257.40	\$ 237.60
	2 Adults	\$ 675.30	\$ 576.00	\$ 983.71	\$ 841.98	\$ 576.00	\$ 550.91	\$ 488.54
	Adult + Child(ren)	\$ 526.39	\$ 576.00	\$ 755.44	\$ 634.49	\$ 576.00	\$ 498.44	\$ 442.01
	Family	\$ 1,237.55	\$ 576.00	\$ 1,706.52	\$ 1,499.02	\$ 576.00	\$ 908.51	\$ 576.00
	1 NonMedicare + 1 Medicare	\$ 374.83	\$ 472.37	\$ 498.47	\$ 429.33	\$ 449.85	\$ 343.65	\$ 338.85
<b>GROUP 5:</b> Ch 21 & 46 10-14 years of service  Max. Subsidy \$384	Single	\$ 370.42	\$ 223.80	\$ 528.42	\$ 459.28	\$ 232.40	\$ 336.60	\$ 158.40
	2 Adults	\$ 867.30	\$ 384.00	\$ 1,175.71	\$ 1,033.98	\$ 384.00	\$ 717.22	\$ 322.23
	Adult + Child(ren)	\$ 718.39	\$ 384.00	\$ 947.44	\$ 826.49	\$ 384.00	\$ 648.91	\$ 291.54
	Family	\$ 1,429.55	\$ 384.00	\$ 1,898.52	\$ 1,691.02	\$ 384.00	\$ 1,100.51	\$ 384.00
	1 NonMedicare + 1 Medicare	\$ 532.33	\$ 314.87	\$ 648.42	\$ 579.28	\$ 299.90	\$ 456.60	\$ 225.90
<b>GROUP 6:</b> Ch 21 & 46 0-9 years of service  Max. Subsidy \$192	Single	\$ 482.38	\$ 111.84	\$ 644.62	\$ 575.48	\$ 116.20	\$ 415.80	\$ 79.20
	2 Adults	\$ 1,059.30	\$ 192.00	\$ 1,367.71	\$ 1,225.98	\$ 192.00	\$ 873.14	\$ 166.31
	Adult + Child(ren)	\$ 910.39	\$ 192.00	\$ 1,139.44	\$ 1,018.49	\$ 192.00	\$ 789.98	\$ 150.47
	Family	\$ 1,621.55	\$ 192.00	\$ 2,090.52	\$ 1,883.02	\$ 192.00	\$ 1,292.51	\$ 192.00
	1 NonMedicare + 1 Medicare	\$ 689.82	\$ 157.38	\$ 798.37	\$ 729.23	\$ 149.95	\$ 569.55	\$ 112.95

**PLEASE TURN OVER FOR THE MEDICARE & DENTAL PLAN RATES**

**Retiree Health Insurance Monthly Premiums**  
**For Retirees Retired Before January 15, 2012**



**MEDICARE ADVANTAGE PLUS PART D PLANS & RATES**  
**Rates Effective January 1, 2022 to December 31, 2022**

	Employer Subsidy Monthly Cap	Coverage Level	Kaiser Permanente Group MAPD		UnitedHealthcare Group MAPD	
			Retiree Share	County Share	Retiree Share	County Share
GROUP 1: Chapter 21: 20+ yrs svc; Chapter 46: 25+ yrs svc	\$960	1 on Medicare	\$ 25.30	\$ 227.68	\$ 18.75	\$ 168.75
		2 on Medicare	\$ 50.60	\$ 455.36	\$ 37.50	\$ 337.50
GROUP 2: Chapter 46 23-24 years of service	\$883	1 on Medicare	\$ 43.51	\$ 209.47	\$ 32.25	\$ 155.25
		2 on Medicare	\$ 87.03	\$ 418.93	\$ 64.50	\$ 310.50
GROUP 3: Chapter 46 20-22 years of service	\$768	1 on Medicare	\$ 70.83	\$ 182.15	\$ 52.50	\$ 135.00
		2 on Medicare	\$ 141.67	\$ 364.29	\$ 105.00	\$ 270.00
GROUP 4: Ch 21 & 46 15-19 years of service	\$576	1 on Medicare	\$ 116.37	\$ 136.61	\$ 86.25	\$ 101.25
		2 on Medicare	\$ 232.74	\$ 273.22	\$ 172.50	\$ 202.50
GROUP 5: Ch 21 & 46 10-14 years of service	\$384	1 on Medicare	\$ 161.91	\$ 91.07	\$ 120.00	\$ 67.50
		2 on Medicare	\$ 323.81	\$ 182.15	\$ 240.00	\$ 135.00
GROUP 6: Ch 21 & 46 0-9 years of service	\$192	1 on Medicare	\$ 207.44	\$ 45.54	\$ 153.75	\$ 33.75
		2 on Medicare	\$ 414.89	\$ 91.07	\$ 307.50	\$ 67.50

**DENTAL PLANS & RATES**  
**Rates Effective July 1, 2022 through June 30, 2023**

	Employer Subsidy Monthly Cap	Coverage Level	Delta Dental Standard Plan			Delta Dental Premium Plan		
			Retiree Share	County Share	Standard Plan Full Pay Rate	Retiree Share	County Share	Premium Plan Full Pay Rate
GROUP 1: Chapter 21: 20+ yrs svc; Chapter 46: 25+ yrs svc	\$960	Single	\$ 7.36	\$ 29.45	\$ 36.81	\$ 31.27	\$ 31.27	\$ 62.54
		2 Adults	\$ 14.71	\$ 58.85	\$ 73.56	\$ 62.53	\$ 62.53	\$ 125.05
		Adult + Child(ren)	\$ 16.02	\$ 64.08	\$ 80.10	\$ 68.10	\$ 68.10	\$ 136.20
		Family	\$ 22.44	\$ 89.77	\$ 112.21	\$ 95.40	\$ 95.40	\$ 190.79
GROUP 2: Chapter 46 23-24 years of service	\$883	Single	\$ 9.57	\$ 27.24	\$ 36.81	\$ 33.77	\$ 28.77	\$ 62.54
		2 Adults	\$ 19.13	\$ 54.43	\$ 73.56	\$ 67.53	\$ 57.52	\$ 125.05
		Adult + Child(ren)	\$ 20.83	\$ 59.27	\$ 80.10	\$ 73.55	\$ 62.65	\$ 136.20
		Family	\$ 29.17	\$ 83.04	\$ 112.21	\$ 103.03	\$ 87.76	\$ 190.79
GROUP 3: Chapter 46 20-22 years of service	\$768	Single	\$ 13.25	\$ 23.56	\$ 36.81	\$ 37.52	\$ 25.02	\$ 62.54
		2 Adults	\$ 26.48	\$ 47.08	\$ 73.56	\$ 75.03	\$ 50.02	\$ 125.05
		Adult + Child(ren)	\$ 28.84	\$ 51.26	\$ 80.10	\$ 81.72	\$ 54.48	\$ 136.20
		Family	\$ 40.40	\$ 71.81	\$ 112.21	\$ 114.47	\$ 76.32	\$ 190.79
GROUP 4: Ch 21 & 46 15-19 years of service	\$576	Single	\$ 19.14	\$ 17.67	\$ 36.81	\$ 43.78	\$ 18.76	\$ 62.54
		2 Adults	\$ 38.25	\$ 35.31	\$ 73.56	\$ 87.54	\$ 37.52	\$ 125.05
		Adult + Child(ren)	\$ 41.65	\$ 38.45	\$ 80.10	\$ 95.34	\$ 40.86	\$ 136.20
		Family	\$ 58.35	\$ 53.86	\$ 112.21	\$ 133.55	\$ 57.24	\$ 190.79
GROUP 5: Ch 21 & 46 10-14 years of service	\$384	Single	\$ 25.03	\$ 11.78	\$ 36.81	\$ 50.03	\$ 12.51	\$ 62.54
		2 Adults	\$ 50.02	\$ 23.54	\$ 73.56	\$ 100.04	\$ 25.01	\$ 125.05
		Adult + Child(ren)	\$ 54.47	\$ 25.63	\$ 80.10	\$ 108.96	\$ 27.24	\$ 136.20
		Family	\$ 76.30	\$ 35.91	\$ 112.21	\$ 152.63	\$ 38.16	\$ 190.79
GROUP 6: Ch 21 & 46 0-9 years of service	\$192	Single	\$ 30.92	\$ 5.89	\$ 36.81	\$ 56.29	\$ 6.25	\$ 62.54
		2 Adults	\$ 61.79	\$ 11.77	\$ 73.56	\$ 112.55	\$ 12.51	\$ 125.05
		Adult + Child(ren)	\$ 67.28	\$ 12.82	\$ 80.10	\$ 122.58	\$ 13.62	\$ 136.20
		Family	\$ 94.26	\$ 17.95	\$ 112.21	\$ 171.71	\$ 19.08	\$ 190.79