

HEALTH PLAN CONTRIBUTION RATES RETIREES

Effective January 1, 2014
Monthly Rates and Contributions

EARLY RETIREEES			
	Retiree Only	Retiree + 1	Family
Blue Shield PPO \$200 Deductible Plan	\$1,034.04	\$1,865.20	\$2,595.63
Blue Shield PPO \$1,250 ABHP*	\$802.04	\$1,448.20	\$2,015.63
Kaiser HMO	\$669.01	\$1,335.12	\$1,888.61
United Healthcare HMO	\$859.49	\$1,757.98	\$2,488.43

MEDICARE RETIREEES			
If you elect coverage...		Then use these rates...	
...for only yourself, and you are enrolled in Medicare Parts A & B....		...One in A & B	
...for yourself and 1 dependent, and one of you is enrolled in Medicare Parts A & B, and one is under 65 and not enrolled in Medicare A & BOne A & B, one not	
...for yourself and 1 dependent, and both of you are enrolled in Medicare Parts A & BTwo in A & B	
	One in A & B	One A & B, one not	Two in A & B
Blue Shield PPO \$200 Deductible Plan	\$737.44	\$1,767.99	\$1,373.99
Blue Shield PPO \$1,250 ABHP*	\$722.04	\$1,521.20	\$1,345.20
Kaiser Senior Advantage	\$441.35	\$1,101.33	\$879.81

COUNTY CONTRIBUTIONS			
Tier	Years of Service	Pre-65	65+
Tier 1	12-14 years	\$218.77	\$159.15
Tier 2	15-19 years	\$331.47	\$241.13
Tier 3	20+ years	\$444.17	\$323.12
4 Year Option**		\$662.94	\$482.27

* Account-Based Health Plan

**The 4-Year option is available only to Local 1 employees at the time of retirement.

Option Dental Coverage			
DELTA DENTAL			
	Retiree Only	Retiree + 1	Family
All Enrollees	\$54.28	\$97.71	\$135.71

Over 65 without Medicare Parts A&B

KAISER 65+ WITHOUT MEDICARE PARTS A & B

Neither Part A nor B, or Part B only	Single
Part A only	\$1,730.78
With dependants	\$1,320.13
	Call Risk Management for rates

BLUE SHIELD WITHOUT MEDICARE PARTS A & B

Note: Blue Shield retirees over 65 without Medicare parts A & B use Early Retiree Blue Shield rates.