

2008 Retiree Health Plan RateTable

RETIREES NOT ENROLLED IN MEDICARE							
RETIREE ENROLLMENT STATUS	PPO PLANS			HEALTH MAINTENANCE PLANS (HMO)			
	Premier Wellwise Plan	Premier Sharewell Plan	Exclusive Care Plan	CIGNA Health Plan	Kaiser Health Plan	Blue Cross Traditional HMO Plan	Blue Cross Select HMO Plan
	Retiree Only	\$793.72	\$277.80	\$529.75	\$612.70	\$610.00	\$593.86
Retiree W/1 Dependent	\$1,468.37	\$486.15	\$962.46	\$1,211.02	\$1,220.00	\$1,187.73	\$930.90
Retiree W/2 or More Dependents	\$1,984.29	\$638.94	\$1,385.27	\$1,685.02	\$1,769.00	\$1,722.20	\$1,349.80

NOTE: Eligible Retirees and/or enrolled dependent age 65 or older must enroll in Medicare Part B. Eligible Retiree entitled to Medicare Part A without a premium must enroll in Medicare Part A. Evidence of Medicare coverage is required. For eligible retirees, the Retiree Medical Grant for 2008 is \$17.17 per month for each year of County Service to a maximum of 25 years. Grant is subject to change based upon retirement date and grant eligibility.

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RETIRES WITH DEPENDENT(S) - MIXED MEDICARE AND NON-MEDICARE ENROLLMENT									
RETIREE ENROLLMENT STATUS	PPO PLANS			Non-Medicare & Medicare HMO				Non-Medicare HMO & Medicare PFFS	
	Premier Wellwise Plan	Premier Sharewell Plan	Exclusive Care Plan	CIGNA Health Plan	Blue Cross Traditional HMO Plan	Blue Cross Select HMO Plan	Kaiser HMO & Senior Advantage Plan	Blue Cross Traditional HMO & SmartValue Custom Plan	Blue Cross Select HMO & SmartValue Custom Plan
	RETIREE W/1 DEPENDENT								
One W/ Medicare Part B Only	\$1,269.95	\$337.33	\$1,209.73	\$1,114.15	\$1,114.75	\$873.70	\$1,036.01	NA	NA
One W/ Medicare Part A & B	\$1,031.83	\$277.80	\$1,019.91	\$1,095.27	NA	NA	\$805.32	\$831.86	\$703.45
RETIREE W/2 OR MORE DEPENDENTS									
One W/ Medicare Part B Only	\$1,746.18	\$436.54	\$1,792.33	\$1,583.95	\$1,114.75	\$873.70	\$1,585.01	NA	NA
One W/ Medicare Part A & B	\$1,509.06	\$377.02	\$1,602.52	\$1,567.07	NA	NA	\$1,354.32	\$1,088.15	\$852.85
Two W/ Medicare Part B Only	\$1,428.69	\$367.09	\$1,558.75	\$1,432.22	\$1,635.64	\$1,281.96	\$1,401.02	NA	NA
Two W/ Medicare Part A & B	\$1,031.83	\$257.96	\$1,179.15	\$1,415.41	NA	NA	\$939.64	\$1,069.86	\$941.45

NOTE: Eligible Retirees and/or enrolled dependent age 65 or older must enroll in Medicare Part B. Eligible Retiree entitled to Medicare Part A without a premium must enroll in Medicare Part A. Evidence of Medicare coverage is required. For eligible retirees, the Retiree Medical Grant for 2008 is \$ 17.17 per month for each year of County Service to a maximum of 25 years. Grant is subject to change based upon retirement date and grant eligibility.

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RETIREES ENROLLED IN MEDICARE									
RETIREE ENROLLMENT STATUS	PPO PLANS			HEALTH MAINTENANCE PLAN (HMO)			MEDICARE ADVANTAGE PLANS		
	Premier	Premier	Exclusive	CIGNA	Blue Cross	Blue Cross	HMO	Private Fee-For-Service (PFFS)	
	Wellwise Plan	Sharewell Plan	Care Plan	Health Plan	Traditional HMO Plan	Select HMO Plan	Kaiser Sr Advantage Plan	Blue Cross SmartValue Custom Plan	Blue Cross SmartValue Standard Plan
RETIREE ONLY									
Retiree Only - Part B Only	\$555.60	\$194.46	\$585.92	\$477.92	\$520.89	\$408.26	\$426.01	NA	NA
Retiree Only - Part A & B	\$357.17	\$125.01	\$396.12	\$404.39	NA	NA	\$195.32	\$238.00	\$109.00
RETIREE W/1 DEPENDENT									
Two W/ Medicare Part B Only	\$992.15	\$267.88	\$1,171.84	\$944.59	\$1,041.78	\$816.51	\$852.02	NA	NA
Two W/ Medicare Part A & B	\$595.29	\$148.82	\$792.24	\$811.38	NA	NA	\$390.64	\$476.00	\$218.00

NOTE: Eligible Retirees and/or enrolled dependent age 65 or older must enroll in Medicare Part B. Eligible Retiree entitled to Medicare Part A without a premium must enroll in Medicare Part A. Evidence of Medicare coverage is required. For eligible retirees, the Retiree Medical Grant for 2008 is \$ 17.17 per month for each year of County Service to a maximum of 25 years. Grant is subject to change based upon retirement date and grant eligibility.