

2009 Retiree Health Plan RateTable

RETIRES NOT ENROLLED IN MEDICARE							
RETIREE ENROLLMENT STATUS	PPO PLAN Insured	HEALTH MAINTENANCE PLANS (HMO)				PPO PLAN Self-Insured	
	Exclusive Care Plan	CIGNA Health Plan	Kaiser Health Plan	Blue Cross Traditional HMO Plan	Blue Cross Select HMO Plan	Premier Wellwise Plan	Premier Sharewell Plan
	Retiree Only	\$582.52	\$693.58	\$639.97	\$647.31	\$507.34	\$920.72
Retiree W/1 Dependent	\$1,058.32	\$1,370.87	\$1,279.94	\$1,294.63	\$1,014.68	\$1,703.31	\$563.93
Retiree W/2 or More Dependents	\$1,523.24	\$1,907.44	\$1,855.94	\$1,877.20	\$1,471.28	\$2,301.78	\$741.17

NOTE: Eligible Retirees and/or enrolled dependent(s) age 65 or older must enroll in Medicare Part B. Eligible Retirees 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 2009 is \$17.69 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 WITH DEPENDENT(S) - MIXED MEDICARE AND NON-MEDICARE ENROLLMENT									
	PPO Insured	Non-Medicare & Medicare HMO				Non-Medicare HMO & Medicare PFFS		PPO Self-Insured	
		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	Premier Wellwise Plan
RETIREE ENROLLMENT STATUS									
RETIREE W/1 DEPENDENT									
One W/ Medicare Part B Only	\$1,330.22	\$1,261.22	\$1,215.08	\$952.34	\$1,087.46	NA	NA	\$1,473.14	\$391.30
One W/ Medicare Part A & B	\$1,121.49	\$1,239.85	NA	NA	\$845.24	\$916.31	\$776.34	\$1,196.92	\$322.25
RETIREE W/2 OR MORE DEPENDENTS									
One W/ Medicare Part B Only	\$1,970.85	\$1,793.03	\$1,215.08	\$952.34	\$1,663.46	NA	NA	\$2,025.57	\$506.39
One W/ Medicare Part A & B	\$1,762.13	\$1,773.92	NA	NA	\$1,421.24	\$1,195.66	\$939.19	\$1,750.51	\$437.34
Two W/ Medicare Part B Only	\$1,714.00	\$1,621.27	\$1,782.85	\$1,397.35	\$1,470.98	NA	NA	\$1,657.28	\$425.82
Two W/ Medicare Part A & B	\$1,296.59	\$1,602.24	NA	NA	\$986.54	\$1,185.31	\$1,045.34	\$1,196.92	\$299.23

NOTE: Eligible Retirees and/or enrolled dependent(s) age 65 or older must enroll in Medicare Part B. Eligible Retirees 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 2009 is \$ 17.69 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 ENROLLED IN MEDICARE									
RETIREE ENROLLMENT STATUS	PPO Insured	HEALTH MAINTENANCE PLANS (HMO)			MEDICARE ADVANTAGE PLANS			PPO Self-Insured	
	Exclusive Care Plan	CIGNA Health Plan	Blue Cross Traditional HMO Plan	Blue Cross Select HMO Plan	HMO	Private Fee-For-Service (PFFS)		Premier Wellwise Plan	Premier Sharewell Plan
					Kaiser Sr Advantage Plan	Blue Cross SmartValue Custom Plan	Blue Cross SmartValue Standard Plan		
RETIREE ONLY									
Retiree Only - Part B Only	\$644.28	\$541.01	\$567.77	\$445.00	\$447.49	NA	NA	\$644.50	\$225.57
Retiree Only - Part A & B	\$435.57	\$457.77	NA	NA	\$205.27	\$269.00	\$130.50	\$414.32	\$145.01
RETIREE W/1 DEPENDENT									
Two W/ Medicare Part B Only	\$1,288.56	\$1,069.28	\$1,135.54	\$890.01	\$894.98	NA	NA	\$1,150.89	\$310.74
Two W/ Medicare Part A & B	\$871.15	\$918.48	NA	NA	\$410.54	\$538.00	\$261.00	\$690.54	\$172.63

NOTE: Eligible Retirees and/or enrolled dependent(s) age 65 or older must enroll in Medicare Part B. Eligible Retirees 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 2009 is \$ 17.69 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.