

RETIREE MONTHLY HEALTH RATES JANUARY 1, 2025

<u>AETNA</u>	RETIREE PAYS
PREMIER HMO	
Retiree Only	\$ 913.72
+ One Dependent	1,928.38
+ Family (2 or more Dependents)	2,696.68
PREMIER PLUS HMO Retiree Only + One Dependent + Family (2 or more Dependents)	\$ 1,057.86 2,232.34 3,122.98
PREMIER CHOICE HSA Retiree Only + One Dependent + Family (2 or more Dependents)	\$ 761.90 1,607.96 2,249.06

AETNA KIDS' PLANS				
BASIC PLAN (AGE	<u> </u>	ENHANCED PLAN (A	GES 5 –26)	
One Child Two Children Three or more Children	\$ 458.18 916.40 1,374.60	One Child Two Children Three or more Children	\$ 767.48 1,535.03 2,302.53	



RETIREE MONTHLY DENTAL/VISION RATES JANUARY 1, 2025

DENTAL	<u>AETNA</u>	COMPBENEFITS (HUMANA)
BASIC DHMO PLAN		
Retiree Only + One Dependent	\$ 9.60 16.14	\$ 7.34 12.70
+ Family (2 or more Dependents)	23.14	17.04
ENHANCED DHMO PLAN		
Retiree Only	\$ 11.40	\$ 9.02
+ One Dependent	20.48	16.40
+ Family (2 or more Dependents)	28.46	22.06
BASIC PPO PLAN		
Retiree Only	\$ 33.28	\$ 31.42
+ One Dependent	63.50	56.86
+ Family (2 or more Dependents)	96.54	85.06
ENHANCED PPO PLAN		
Retiree Only	\$ 43.20	\$ 37.28
+ One Dependent	85.22	71.42
+ Family (2 or more Dependents)	140.10	111.72

VISION	<u>AETNA</u>	COMPBENEFITS (HUMANA)
BASIC PLAN Retiree Only + One Dependent + Family (2 or more Dependents)	\$ 3.30 7.32 12.61	\$ 3.02 7.32 12.54
ENHANCED PLAN Retiree Only + One Dependent + Family (2 or more Dependents)	\$ 5.75 12.70 21.78	\$ 4.58 11.04 18.90

Health & Kids' Plans on Reverse Side