## 2021 Non-Medicare Retiree Rates per Month

Hired prior to 10/5/1988 OR after 10/5/88 with 25+ years of service	Health Center Plan				Consumer Choice Plan			
	TOTAL Monthly Premium	Completed MHA, tobacco affidavit and physical	Completed MHA and tobacco affidavit OR physical	Did not complete MHA, tobacco affidvait and/or physical		Completed MHA, tobacco affidavit and physical	Completed MHA and tobacco affidavit OR physical	Did not complete MHA, tobacco affidvait and/or physical
Retiree Only	\$1,139.89	\$100.00	\$150.00	\$200.00	\$930.31	\$0.00	\$50.00	\$100.00
Retiree + Spouse	\$2,744.92	\$738.17	\$788.17	\$838.17	\$2,293.31	\$541.17	\$591.17	\$641.17
Retiree + Child(ren)	\$1,996.42	\$444.41	\$494.41	\$544.41	\$1,657.25	\$288.63	\$338.63	\$388.63
Retiree + Family	\$3,546.68	\$1,056.52	\$1,106.52	\$1,156.52	\$2,974.81	\$811.76	\$861.76	\$911.76

Hired after 10/5/1988 and years of service between 15 and 24 years	Health Center Plan				Consumer Choice Plan				
	TOTAL Monthly Premium	Completed MHA, tobacco affidavit and physical	Completed MHA and tobacco affidavit OR physical	Did not complete MHA, tobacco affidvait and/or physical	TOTAL Monthly Premium	Completed MHA, tobacco affidavit and physical	Completed MHA and tobacco affidavit OR physical	Did not complete MHA, tobacco affidvait and/or physical	
Retiree Only	\$1,139.89	\$401.06	\$451.06	\$501.06	\$930.31	\$298.40	\$348.40	\$398.40	
Retiree + Spouse	\$2,744.92	\$905.40	\$955.40	\$1,005.40	\$2,293.31	\$723.46	\$773.46	\$823.46	
Retiree + Child(ren)	\$1,996.42	\$739.73	\$789.73	\$839.73	\$1,657.25	\$621.38	\$671.38	\$721.38	
Retiree + Family	\$3,546.68	\$1,290.14	\$1,340.14	\$1,390.14	\$2,974.81	\$1,008.36	\$1,058.36	\$1,108.36	

Hired after 10/5/1988 and years of service between 5 and 14 years	Health Center Plan				Consumer Choice Plan				
	TOTAL Monthly Premium	Completed MHA, tobacco affidavit and physical	Completed MHA and tobacco affidavit OR physical	Did not complete MHA, tobacco affidvait and/or physical		Completed MHA, tobacco affidavit and physical	Completed MHA and tobacco affidavit OR physical	Did not complete MHA, tobacco affidvait and/or physical	
Retiree Only	\$1,139.89	\$741.80	\$791.80	\$841.80	\$930.31	\$558.03	\$608.03	\$658.03	
Retiree + Spouse	\$2,744.92	\$1,079.79	\$1,129.79	\$1,179.79	\$2,293.31	\$860.37	\$910.37	\$960.37	
Retiree + Child(ren)	\$1,996.42	\$1,017.20	\$1,067.20	\$1,117.20	\$1,657.25	\$812.06	\$862.06	\$912.06	
Retiree + Family	\$3,546.68	\$1,407.48	\$1 <i>,</i> 457.48	\$1,507.48	\$2,974.81	\$1,097.77	\$1,147.77	\$1,197.77	

Hired after 1/1/2009	Health Center Plan				Consumer Choice Plan				
	TOTAL Monthly Premium	Completed MHA, tobacco affidavit and physical	Completed MHA and tobacco affidavit OR physical	Did not complete MHA, tobacco affidvait and/or physical	TOTAL Monthly Premium	Completed MHA, tobacco affidavit and physical	Completed MHA and tobacco affidavit OR physical	Did not complete MHA, tobacco affidvait and/or physical	
Retiree Only	\$1,139.89	\$1,139.89	\$1,189.89	\$1,239.89	\$930.31	\$930.31	\$980.31	\$1,030.31	
Retiree + Spouse	\$2,744.92	\$2,744.92	\$2,794.92	\$2,844.92	\$2,293.31	\$2,293.31	\$2,343.31	\$2,393.31	
Retiree + Child(ren)	\$1,996.42	\$1,996.42	\$2,046.42	\$2,096.42	\$1,657.25	\$1,657.25	\$1,707.25	\$1,757.25	
Retiree + Family	\$3,546.68	\$3,546.68	\$3,596.68	\$3,646.68	\$2,974.81	\$2,974.81	\$3,024.81	\$3,074.81	

Surviving Spouse	Health Center Plan				Consumer Choice Plan				
	TOTAL Monthly Premium	Completed MHA, tobacco affidavit and physical	Completed MHA and tobacco affidavit OR physical	Did not complete MHA, tobacco affidvait and/or physical		Completed MHA, tobacco affidavit and physical	Completed MHA and tobacco affidavit OR physical	Did not complete MHA, tobacco affidvait and/or physical	
Spouse	\$1,605.03	\$638.17	\$688.17	\$738.17	\$1,363.00	\$541.17	\$591.17	\$641.17	
Child(ren) Only	\$856.53	\$344.41	\$394.41	\$444.41	\$744.94	\$288.63	\$338.63	\$388.63	
Spouse + Children	\$2,406.79	\$956.52	\$1,006.52	\$1,056.52	\$2,107.94	\$811.76	\$861.76	\$911.76	