

**2020 Retiree Health Plan Rate Table**

RETIREES ENROLLED IN MEDICARE									
RETIREE ENROLLMENT STATUS	PPO PLANS		HEALTH MAINTENANCE PLANS (HMO)		MEDICARE ADVANTAGE PLANS				
	Wellwise Retiree Plan	Sharewell Retiree Plan	Blue Cross Traditional HMO Plan	Blue Cross Select HMO Plan	HEALTH MAINTENANCE PLANS (HMO)			Preferred Provider Organization (PPO)	
					Kaiser Sr Advantage Plan	Scan HMO Plan	Blue Cross Sr Secure HMO Plan	Blue Cross Preferred Custom PPO Plan	Blue Cross Preferred Standard PPO Plan
<b>RETIREE ONLY</b>									
Retiree Only - Part B Only	\$1,033.83	\$702.25	\$1,965.88	\$1,085.20	\$619.46	NA	NA	NA	NA
Retiree Only - Part A & B	\$682.56	\$471.08	NA	NA	\$284.16	\$286.86	\$360.75	\$584.95	\$390.20
<b>RETIREE W/1 DEPENDENT</b>									
Two W/ Medicare Part B Only	\$1,860.89	\$1,095.51	\$3,931.73	\$2,170.44	\$1,238.92	NA	NA	NA	NA
Two W/ Medicare Part A & B	\$1,255.91	\$689.66	NA	NA	\$568.32	\$573.72	\$721.50	\$1,169.90	\$780.40
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 2020 is 24.14 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.									