



**Retiree (15-19 Years of Service) Monthly Premiums
Effective January 1, 2024**

Optima Health

PPO	Total Premium	Employer	Retiree Monthly
Retiree Only	\$ 1,054.00	\$ -	\$ 1,054.00
Retiree & Spouse	\$ 2,425.00	\$ -	\$ 2,425.00
Retiree & Child	\$ 1,465.00	\$ -	\$ 1,465.00
Retiree & Children	\$ 2,256.00	\$ -	\$ 2,256.00
Family	\$ 3,563.00	\$ -	\$ 3,563.00

POS	Total Premium	Employer	Retiree Monthly
Retiree Only	\$ 897.00	\$ -	\$ 897.00
Retiree & Spouse	\$ 2,063.00	\$ -	\$ 2,063.00
Retiree & Child	\$ 1,247.00	\$ -	\$ 1,247.00
Retiree & Children	\$ 1,919.00	\$ -	\$ 1,919.00
Family	\$ 2,993.00	\$ -	\$ 2,993.00

HMO	Total Premium	Employer	Retiree Monthly
Retiree Only	\$ 787.00	\$ -	\$ 787.00
Retiree & Spouse	\$ 1,810.00	\$ -	\$ 1,810.00
Retiree & Child	\$ 1,094.00	\$ -	\$ 1,094.00
Retiree & Children	\$ 1,684.00	\$ -	\$ 1,684.00
Family	\$ 2,659.00	\$ -	\$ 2,659.00

CDHP	Total Premium	Employer	Retiree Monthly
Retiree Only	\$ 735.00	\$ -	\$ 735.00
Retiree & Spouse	\$ 1,691.00	\$ -	\$ 1,691.00
Retiree & Child	\$ 1,024.00	\$ -	\$ 1,024.00
Retiree & Children	\$ 1,575.00	\$ -	\$ 1,575.00
Family	\$ 2,483.00	\$ -	\$ 2,483.00

Anthem Dental

Basic	Total Premium	Employer	Retiree Monthly
Retiree Only	\$ 28.88	\$ -	\$ 28.88
Retiree & Spouse	\$ 58.88	\$ -	\$ 58.88
Retiree & Children	\$ 75.04	\$ -	\$ 75.04
Family	\$ 110.96	\$ -	\$ 110.96

Enhanced	Total Premium	Employer	Retiree Monthly
Retiree Only	\$ 36.32	\$ -	\$ 36.32
Retiree & Spouse	\$ 74.04	\$ -	\$ 74.04
Retiree & Children	\$ 94.40	\$ -	\$ 94.40
Family	\$ 139.64	\$ -	\$ 139.64

Davis Vision

Basic	Employee Monthly
Employee Only	\$ 4.64
Employee & Spouse	\$ 8.16
Employee & Children	\$ 9.28
Family	\$ 13.44

Enhanced	Employee Monthly
Employee Only	\$ 5.40
Employee & Spouse	\$ 9.48
Employee & Children	\$ 10.76
Family	\$ 15.64