2014 Retiree Health Plan RateTable

	PPO PLANS		Non-Medicare & Medicare HMO					Non-Medicare HMO & Medicare PPO
			Blue Cross	Blue Cross				Blue Cross
RETIREE	Wellwise	Sharewell	Select HMO	Traditional HMO	Blue Cross	Blue Cross	Kaiser HMO &	Traditional HMO &
ENROLLMENT STATUS	Retiree	Retiree	& Sr Secure HMO	& Sr Secure HMO	Traditional HMO	Select HMO	Senior Advantage	Preferred Custom PPC
	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan
RETIREE W/1 DEPENDENT								
One W/ Medicare Part B Only	\$2,636.76	\$649.04	NA	NA	\$2,054.60	\$1,398.27	\$1,336.88	NA
One W/ Medicare Part A & B	\$2,295.21	\$534.51	\$1,144.88	\$1,494.53	NA	NA	\$1,057.01	\$1,691.46
RETIREE W/2 OR MORE DEPENDENTS								
One W/ Medicare Part B Only	\$3,572.18	\$910.60	NA	NA	\$2,054.60	\$1,398.27	\$2,074.61	NA
One W/ Medicare Part A & B	\$3,230.63	\$765.72	\$1,384.01	\$1,966.90	NA	NA	\$1,794.74	\$2,163.83
Two W/ Medicare Part B Only	\$2,457.92	\$766.77	NA	NA	\$2,784.18	\$1,894.80	\$1,771.83	NA
Two W/ Medicare Part A & B	\$1,816.17	\$538.34	\$1,544.87	\$1,894.52	NA	NA	\$1,212.09	\$2,288.36

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 2014 is \$20.51 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 eligiblity.