

# 2021 Monthly insurance premiums for funded retirees



Rates may vary for optional employers. Verify rates with your benefits office.

## Retiree eligible for Medicare, spouse eligible for Medicare

	Retiree	Retiree/spouse	Retiree/children	Full family
Medicare Supplemental <sup>1,2</sup>	\$97.68	\$253.36	\$143.86	\$306.56
Carve-out Plan <sup>1</sup>	\$79.68	\$217.36	\$125.86	\$270.56
Dental Plus	\$25.96	\$60.12	\$74.26	\$99.98
Basic Dental	\$0.00	\$7.64	\$13.72	\$21.34
State Vision Plan	\$5.80	\$11.60	\$12.46	\$18.26
Tobacco-use premium <sup>1</sup>	\$40.00	\$60.00	\$60.00	\$60.00

## Retiree eligible for Medicare, spouse not eligible for Medicare

	Retiree/spouse	Full family
Medicare Supplemental <sup>1,2</sup>	\$253.36	\$299.54
Carve-out Plan <sup>1</sup>	\$235.36	\$281.54
Dental Plus	\$60.12	\$99.98
Basic Dental	\$7.64	\$21.34
State Vision Plan	\$11.60	\$18.26
Tobacco-use premium <sup>1</sup>	\$60.00	\$60.00

## Retiree not eligible for Medicare, spouse eligible for Medicare

	Retiree/spouse	Full family
Medicare Supplemental <sup>1,2</sup>	\$253.36	\$299.54
Carve-out Plan <sup>1</sup>	\$235.36	\$281.54
Dental Plus	\$60.12	\$99.98
Basic Dental	\$7.64	\$21.34
State Vision Plan	\$11.60	\$18.26
Tobacco-use premium <sup>1</sup>	\$60.00	\$60.00

<sup>1</sup>State Health Plan subscribers who use tobacco or e-cigarettes or cover dependents who use tobacco or e-cigarettes will pay a \$40 per month premium for subscriber-only coverage. The premium is \$60 for other levels of coverage. The premium is automatic for all State Health Plan subscribers unless the subscriber certifies no one he covers uses tobacco or e-cigarettes, or covered individuals who use tobacco or e-cigarettes have completed the Quit For Life<sup>®</sup> tobacco cessation program.

<sup>2</sup>If the Medicare Supplemental Plan is elected, claims for covered subscribers not eligible for Medicare will be based on the Standard Plan provisions.

## Retiree not eligible for Medicare, spouse not eligible for Medicare

	Retiree	Retiree/spouse	Retiree/children	Full family
<b>Standard Plan<sup>1</sup></b>	\$97.68	\$253.36	\$143.86	\$306.56
<b>Savings Plan<sup>1</sup></b>	\$9.70	\$77.40	\$20.48	\$113.00
<b>TRICARE Supplement</b>	\$62.50	\$121.50	\$121.50	\$162.50
<b>Dental Plus</b>	\$25.96	\$60.12	\$74.26	\$99.98
<b>Basic Dental</b>	\$0.00	\$7.64	\$13.72	\$21.34
<b>State Vision Plan</b>	\$5.80	\$11.60	\$12.46	\$18.26
<b>Tobacco-use premium<sup>1</sup></b>	\$40.00	\$60.00	\$60.00	\$60.00

## Retiree not eligible for Medicare, spouse not eligible for Medicare, one or more children eligible for Medicare

	Retiree/children	Full family
<b>Medicare Supplemental<sup>1,2</sup></b>	\$161.86	\$324.56
<b>Carve-out Plan<sup>1</sup></b>	\$143.86	\$306.56
<b>Dental Plus</b>	\$74.26	\$99.98
<b>Basic Dental</b>	\$13.72	\$21.34
<b>State Vision Plan</b>	\$12.46	\$18.26
<b>Tobacco-use premium<sup>1</sup></b>	\$60.00	\$60.00

<sup>1</sup>State Health Plan subscribers who use tobacco or e-cigarettes or cover dependents who use tobacco or e-cigarettes will pay a \$40 per month premium for subscriber-only coverage. The premium is \$60 for other levels of coverage. The premium is automatic for all State Health Plan subscribers unless the subscriber certifies no one he covers uses tobacco or e-cigarettes, or covered individuals who use tobacco or e-cigarettes have completed the Quit For Life<sup>®</sup> tobacco cessation program.

<sup>2</sup>If the Medicare Supplemental Plan is elected, claims for covered subscribers not eligible for Medicare will be based on the Standard Plan provisions.