

# Monthly insurance premiums for partially 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>	\$329.22	\$735.80	\$522.28	\$917.78
Carve-out Plan¹	\$311.22	\$699.80	\$504.28	\$881.78
Dental Plus	\$33.34	\$68.16	\$82.50	\$108.68
Basic Dental	\$6.74	\$14.38	\$20.46	\$28.08
State Vision Plan	\$5.94	\$11.88	\$12.76	\$18.70
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>	\$735.80	\$910.76
Carve-out Plan¹	\$717.80	\$892.76
Dental Plus	\$68.16	\$108.68
Basic Dental	\$14.38	\$28.08
State Vision Plan	\$11.88	\$18.70
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>	\$735.80	\$910.76
Carve-out Plan¹	\$717.80	\$892.76
Dental Plus	\$68.16	\$108.68
Basic Dental	\$14.38	\$28.08
State Vision Plan	\$11.88	\$18.70
Tobacco-use premium¹	\$60.00	\$60.00

¹State 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® 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
Standard Plan <sup>1</sup>	\$329.22	\$735.80	\$522.28	\$917.78
Savings Plan <sup>1</sup>	\$241.24	\$559.84	\$398.90	\$724.22
TRICARE Supplement	\$62.50	\$121.50	\$121.50	\$162.50
Dental Plus	\$33.34	\$68.16	\$82.50	\$108.68
Basic Dental	\$6.74	\$14.38	\$20.46	\$28.08
State Vision Plan	\$5.94	\$11.88	\$12.76	\$18.70
Tobacco-use premium¹	\$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
Medicare Supplemental <sup>1,2</sup>	\$540.28	\$935.78
Carve-out Plan¹	\$522.28	\$917.78
Dental Plus	\$82.50	\$108.68
Basic Dental	\$20.46	\$28.08
State Vision Plan	\$12.76	\$18.70
Tobacco-use premium¹	\$60.00	\$60.00

¹State 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® 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.