

**Retirees Paying 5% - 2024 HI Rates Including Medicare
CDPHP; MVP Health Plan**

POS \$20 Co-Pay, \$5/20/40

	Monthly Premium	Annual Premium	5% Contribution	Annual Net Portion	Monthly Net Premium	Employee Bi-Weekly Contribution	Retiree 5% Monthly Contribution
Individual	947.90	11,374.80	568.74	10,806.06	900.51	21.87	47.40
Two-Person	1,932.84	23,194.08	1,159.70	22,034.38	1,836.20	44.60	96.64
Family	2,558.48	30,701.76	1,535.09	29,166.67	2,430.56	59.04	127.92
Ind w/Med	349.61	4,195.32	209.77	3,985.55	332.13	n/a	17.48
2 Per w/Med	699.22	8,390.64	419.53	7,971.11	664.26	n/a	34.96
1 Ind, 1 w/Med	1,297.51	15,570.12	778.51	14,791.61	1,232.63	n/a	64.88
Family w/Med	2,282.45	27,389.40	1,369.47	26,019.93	2,168.33	n/a	114.12

POS \$25 Co-Pay Plan, RX \$5/25/50 (Medicare Adv Plan, PPO \$10; RX \$5/20/40)

	Monthly Premium	Annual Premium	5% Contribution	Annual Net Portion	Monthly Net Premium	Employee Bi-Weekly Contribution	Retiree 5% Monthly Contribution
Individual	938.24	11,258.88	562.94	10,695.94	891.33	21.65	46.91
Two-Person	1,913.14	22,957.68	1,147.88	21,809.80	1,817.48	44.15	95.66
Family	2,532.37	30,388.44	1,519.42	28,869.02	2,405.75	58.44	126.62
Ind w/Med	349.61	4,195.32	209.77	3,985.55	332.13	n/a	17.48
2 Per w/Med	699.22	8,390.64	419.53	7,971.11	664.26	n/a	34.96
1 Ind, 1 w/Med	1,287.85	15,454.20	772.71	14,681.49	1,223.46	n/a	64.39
Family w/Med	2,262.75	27,153.00	1,357.65	25,795.35	2,149.61	n/a	113.14

PPO \$15 Co-Pay; RX \$5/25/50 (Medicare Adv Plan, PPO \$10; RX \$5/20/40)

	Monthly Premium	Annual Premium	5% Contribution	Annual Net Portion	Monthly Net Premium	Employee Bi-Weekly Contribution	Retiree 5% Monthly Contribution
Individual	982.71	11,792.52	589.63	11,202.89	933.57	22.68	49.14
Two-Person	2,003.87	24,046.44	1,202.32	22,844.12	1,903.68	46.24	100.19
Family	2,652.46	31,829.52	1,591.48	30,238.04	2,519.84	61.21	132.62
Ind w/Med	349.61	4,195.32	209.77	3,985.55	332.13	n/a	17.48
2 Per w/Med	699.22	8,390.64	419.53	7,971.11	664.26	n/a	34.96
1 Ind, 1 w/Med	1,332.32	15,987.84	799.39	15,188.45	1,265.70	n/a	66.62
Family w/Med	2,353.48	28,241.76	1,412.09	26,829.67	2,235.81	n/a	117.67

** Effective 1/1/18, Medicare Elig Retirees/Spouses will be covered under the PPO \$10 co-pay (High Plan) Medicare Advantage Plan through MVP Health Care, Non-Medicare Retirees will remain with CDPHP