

2008 Retiree Health Plan Rate Table

RETIREE ENROLLED IN MEDICARE A & B

RETIREE ENROLLMENT STATUS	PPO PLANS			HEALTH MAINTENANCE PLAN (HMO)		MEDICARE ADVANTAGE PLANS		
	Premier Wellwise Plan	Premier Sharewell Plan	Exclusive Care Plan	CIGNA Health Plan	HMO Kaiser Sr Advantage Plan	Private Fee-For-Service (PFFS) Blue Cross SmartValue Custom Plan	Blue Cross SmartValue Standard Plan	
RETIREE ONLY								
Retiree Only - Part A & B	\$357.17	\$125.01	\$396.12	\$404.39	\$195.32	\$238.00	\$109.00	
RETIREE W/1 DEPENDENT								
Two W/ Medicare Part A & B	\$595.29	\$148.82	\$792.24	\$811.38	\$390.64	\$476.00	\$218.00	

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 EW eligible retirees, the Retiree Medical Grant for 2008 is \$ 17.50 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 eligibility.