Medical Plan Cost - Exist ng Ret rees ONLY

The monthly premiums listed below are e ect ve 10/1/2024 through 9/30/2025. Ret ree responsibility of premium varies based on years of service at time of ret rement.

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RAISER PERIMANEN	

Kaiser HMO Ret rees Under 65

	\$1,027.00
+ One Dependent	
Ret ree + Two or more Dependents	\$2,896.00

Kaiser Deduct ble -DHMO Ret rees Under 65

Ret ree + Two or more Dependents	2,754.00

Kaiser High Deduct ble Health Plan - HDHP Ret rees Under 65

Ret ree Only	\$810.00
Ret ree + One Dependent	\$1,615.00
Ret ree + Two or more Dependents	\$2,283.00

Anthem PPO Ret rees Under 65

Ret ree Only	\$1,159.00
Ret ree + One Dependent	\$2,315.00
Ret ree + Two or more Dependents	\$3,282.00

Anthem PPO Deduct ble Plan Ret rees Under 65

Ret ree Only	\$936.00
Ret ree + One Dependent	\$1,861.00
Ret ree + Two or more Dependents	\$2,633.00

Anthem High Deduct ble Health Plan - HDHP Ret rees Under 65

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