			Bl	ue Cross	Blue Sl	nield			
				Single	Premium				
	Single No	Single No		Single with	Single with				
	Medicare Retiree	Medicare Employer	Total Monthly	Medicare Retiree	Medicare	Total Monthly			
Medical Plan and Carrier	Premium	Premium	Premium	Premium	Premium	Premium			
High Option Plan	\$405.84	\$405.84	\$811.68	\$359.65	\$359.65	\$719.30			
Low Option Plan	\$289.01	\$289.01	\$578.02	\$256.12	\$256.12	\$512.24			
EPO Option Plan	\$365.25	\$365.25	\$730.50	\$323.68	\$323.68	\$647.36			
	,			2 Party	Premium	•	,		
				Two Party	Two Party		Two Party	Two Party	
	•	Two Party No		One on	One on		with	with	
	Medicare Retiree	Medicare	Total Monthly	Medicare Retiree	Medicare	Total Monthly	Medicare Retiree	Medicare Employer	
Medical Plan and Carrier	Premium	Employer Premium	Premium	Premium	Premium	Premium	Premium	Premium	Total Monthly Premium
High Option Plan	\$771.84	\$771.84	\$1,543.68	\$725.65	\$725.65	\$1,451.30			\$1,438.60
Low Option Plan	\$549.67	\$549.67	\$1,099.34	\$516.78	\$516.78	\$1,033.56	\$512.24	\$512.24	\$1,024.48
EPO Option Plan	\$694.64	\$694.64	\$1,389.28	\$653.07	\$653.07	\$1,306.14		\$647.36	\$1,294.72
·				Family	Premium				
				One Medicare			Two Party	Two Party	
	Family No	Family No		Two or More	Two or More		with	with	
	Medicare Retiree	Medicare Employer	Total Monthly	No Medicare Retiree	No Medicare Employer	Total Monthly	Medicare Retiree	Medicare Employer	
Medical Plan and Carrier	Premium	Premium	Premium	Premium	Premium	Premium		Premium	Total Monthly Premium
High Option Plan	\$1,030.88	\$1,030.88	\$2,061.76	\$984.69	\$984.69	\$1,969.38			\$1,877.00
Low Option Plan	\$734.18	\$734.18	\$1,468.36	\$701.29	\$701.29	\$1,402.58	i i		\$1,336.80
EPO Option Plan	\$927.78	\$927.78	\$1,855.56	\$886.21	\$886.21	\$1,772.42		\$844.64	\$1,689.28
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7-/		gna	7-7	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	70	<del>+-,</del>
					Premium				
	Single No	Single No		Single with	Single with				
	Medicare	•	Total Monthly	Medicare		Total Monthly			
Medical Plan and Carrier	Retiree	Employer	Premium	Retiree	Employer	Premium			
High Option Plan	\$387.52	\$387.52	\$775.04	\$343.42	\$343.42	\$686.84			
Low Option Plan	\$277.26	\$277.26	\$554.52	\$245.71	\$245.71	\$491.42			
					Premium				
				Two Party	Two Party		Two Party	Two Party	
	Two Party No	Two Party No		One on	One on		with	with	
	Medicare Retiree	Medicare Employer	Total Monthly	Medicare Retiree	Medicare	Total Monthly	Medicare Retiree	Medicare Employer	
Medical Plan and Carrier	Premium	Premium	Premium	Premium	Premium	Premium	Premium	Premium	Total Monthly Premium
High Option Plan	\$748.07	\$748.07	\$1,496.14	\$703.97	\$703.97	\$1,407.94	\$686.84	\$686.84	\$1,373.68
Low Option Plan	\$535.22	\$535.22	\$1,070.44	\$503.67	\$503.67	\$1,007.34		\$491.42	\$982.84
20W Option Figure	<b>V</b> 0001.22	<b>V</b> 303:22	<b>\$2,070.11</b>		Premium	ψ <u>2</u> )σσ7.σ1	Ų 13211 <b>2</b>	V.52.12	φουίο
				One Medicare	One Medicare		Two Medicare	Two Medicare	
	Family No	Family No		Two or More	Two or More		One or more	One or more	
	Medicare	Medicare		No Medicare	No Monthly		No Medicare		
Medical Plan and Carrier	Retiree Premium	Premium	Total Monthly Premium	Retiree Premium	Premium	Total Monthly Premium		Employer Premium	Total Monthly Premium
High Option Plan	\$1,002.67	\$1,002.67	\$2,005.34	\$958.57	\$958.57	\$1,917.14		\$914.47	\$1,828.94
Low Option Plan	\$717.38	\$717.38	\$1,434.76	\$685.83 <b>Droch</b>	yterian	\$1,371.66	\$654.28	\$654.28	\$1,308.56
					Premium				
	Single No Medicare	Single No		Single with	Single with				
	Retiree	Medicare Employer	Total Monthly	Medicare Retiree	Medicare Employer	Total Monthly			
Medical Plan and Carrier	Premium	Premium	Premium	Premium	Premium	Premium			
High Option Plan	\$328.19	\$328.19	\$656.38	\$290.84	\$290.84	\$581.68	Ī		
Low Option Plan	\$233.75	\$233.75	\$467.50	\$207.15	\$207.15	\$414.30	Ī		
·			,		Premium	, ,			
	-	Two Party No		Two Party	Two Party		Two Party	Two Party	
	Medicare	Medicare	T-1-13	One on	One on	T-1-130	with	with	
Medical Plan and Carrier	Retiree Premium	Employer Premium	Total Monthly Premium	Medicare Retiree	Medicare Employer	Total Monthly Premium	Medicare Retiree		Total Monthly Premium
High Option Plan	\$689.16	\$689.16	\$1,378.32	\$651.81	\$651.81	\$1,303.62			\$1,163.36
Low Option Plan	\$490.80	\$490.80	\$1,378.32	\$464.20	\$464.20	\$1,303.62			\$1,163.36
LOW OPHION FIGHT	3430.80	949U.6U	3281.00		Premium	<b>⊋</b> ₹8.40	ş+14.3U	3414.3U	\$828.60
					One Medicare		Two Medicare	Two Medicare	
						1		One or more	
	Family No	Family No		Two or More	Two or More		One or more		
	Medicare	Medicare	Tatal No	No Medicare	No Monthly	Takal Mar	No Medicare	No Medicare	
Medical Plan and Carrier	Medicare Retiree	Medicare Employer	Total Monthly	No Medicare Retiree	No Monthly Employer	Total Monthly	No Medicare Retiree	No Medicare Employer	Total Monthly Promium
Medical Plan and Carrier High Option Plan	Medicare	Medicare	Total Monthly Premium \$1,837.90	No Medicare	No Monthly	Total Monthly Premium \$1,763.20	No Medicare Retiree Premium	No Medicare Employer Premium	Total Monthly Premium \$1,688.50

				Delta Dental
				Single Premium
	Retiree	Employer Total N	<b>Monthly</b>	
Dental Carrier	Premium		remium	
High Option Plan	\$14.30	\$14.30	\$28.60	
Low Option Plan	\$7.16	\$7.16	\$14.32	
				2 Party Premium
Dental Carrier	Retiree Premium	Employer Total N	Monthly remium	
High Option Plan  Low Option Plan	\$27.22 \$13.63	\$27.22 \$13.63	\$54.44 \$27.26	
LOW OPCION FIAM	\$13.03	313.03	327.20	Family Premium
	Retiree	Employer Total N		·
Dental Carrier	Premium	Premium P	remium	
High Option Plan	\$42.77	\$42.77	\$85.54	
Low Option Plan	\$21.39	\$21.39	\$42.78	
			ι	Jnited Concordia
				Single Premium
Donated Country	Retiree	Employer Total N		
Dental Carrier	Premium		remium	
High Option Plan	\$14.30 \$7.16	\$14.30 \$7.16	\$28.60 \$14.32	
Low Option Plan	\$7.16	\$7.16	\$14.32	2 Party Premium
	Retiree	Employer Total N	/lonthly	2 raity rieilliulli
Dental Carrier	Premium		remium	
High Option Plan	\$27.22	\$27.22	\$54.44	
Low Option Plan	\$13.63	\$13.63	\$27.26	
				Family Premium
	Retiree	Employer Total N		
Dental Carrier	Premium		remium	
High Option Plan	\$42.77	\$42.77	\$85.54	
Low Option Plan	\$21.39	\$21.39	\$42.78	David Vision Dian
			L	Davis Vision Plan
	Retiree	Employer Total N	/onthly	Single Premium
Vision Carrier	Premium		remium	
Davis Vision	\$3.13	\$3.13	\$6.26	
				2 Party Premium
	Retiree	Employer Total N		·
Vision Carrier	Premium		remium	
Davis Vision	\$5.24	\$5.24	\$10.48	E. of D. of
			1	Family Premium
	Retiree	Employer Total N	/lonthly	
Vision Carrier	Premium		remium	
Davis Vision	\$7.07	\$7.07	\$14.14	