

RETIREE Health Plan Rates as of July 1, 2022

These rates will be reflected in your July 2022 pension check

PLEASE NOTE THAT ALL RATES ARE SUBJECT TO CHANGE

| MONTHLY NON-MEDICARE | | | | | | | | | | | | | |
|------------------------------|-------------------|-------------------|---------------|------------------------------|-------------------|-----------------|-------------------|---|--------------------------------------|-------------------|--|-------------------------|-------------------|
| INDIVIDUAL | Aetna EPO | CIGNA | DC37 Med-Team | Empire Blue Access Gated EPO | Empire EPO | GHI-CBP/EBCBS | GHI HMO | HIP HMO Gold Preferred Plan Grandfathered (closed to new enrollments) | HIP HMO Gold Preferred Plan Standard | HIP Prime POS | MetroPlus Gold Grandfathered (closed to new enrollments) | MetroPlus Gold Standard | Vytra |
| Basic | \$449.19 | \$1,056.20 | \$0.00 | \$396.67 | \$972.21 | \$0.00 | \$259.29 | \$0.00 | \$0.00 | \$1,122.21 | \$0.00 | \$0.00 | \$205.59 |
| Prescription Drugs | \$2,125.33 | \$329.89 | \$0.00 | \$396.09 | \$396.09 | \$76.08 | \$463.57 | \$335.24 | \$152.64 | \$372.17 | \$278.97 | \$138.93 | \$395.28 |
| Rider Other* | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$4.14 | \$0.00 | \$9.68 | \$9.68 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Total (Basic + Rider) | \$2,574.52 | \$1,386.09 | \$0.00 | \$792.76 | \$1,368.30 | \$80.22 | \$722.86 | \$344.92 | \$162.32 | \$1,494.38 | \$278.97 | \$138.93 | \$600.87 |
| FAMILY | Aetna EPO | CIGNA | DC37 Med-Team | Empire Blue Access Gated EPO | Empire EPO | GHI-CBP/EBCBS | GHI HMO | HIP HMO Gold Preferred Plan Grandfathered (closed to new enrollments) | HIP HMO Gold Preferred Plan Standard | HIP Prime POS | MetroPlus Gold Grandfathered (closed to new enrollments) | MetroPlus Gold Standard | Vytra |
| Basic | \$1,843.27 | \$2,850.45 | \$0.00 | \$1,162.43 | \$2,474.97 | \$0.00 | \$747.34 | \$0.00 | \$0.00 | \$2,749.40 | \$0.00 | \$0.00 | \$700.18 |
| Prescription Drugs | \$6,011.13 | \$998.42 | \$0.00 | \$971.03 | \$971.03 | \$139.49 | \$1,182.23 | \$821.34 | \$279.86 | \$911.83 | \$697.42 | \$253.80 | \$1,028.35 |
| Rider Other* | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$10.47 | \$0.00 | \$23.74 | \$23.74 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Total (Basic + Rider) | \$7,854.40 | \$3,848.87 | \$0.00 | \$2,133.46 | \$3,446.00 | \$149.96 | \$1,929.57 | \$845.08 | \$303.60 | \$3,661.23 | \$697.42 | \$253.80 | \$1,728.53 |

* For GHI-CBP/EBCBS, "Rider Other" is for enhanced major medical coverage. For HIP HMO, "Rider Other" is for private duty nursing & durable medical equipment.

| MONTHLY MEDICARE | | | | | | | | | | | | |
|------------------------------|--|---|-------------------------|---------------------------|-------------------------|-------------------------------|-----------------|------------------------------------|-----------------------|-----------------------|--|---|
| INDIVIDUAL | Aetna Medicare Advantage Plan PPO/ESA (NY/NJ/PA) | Aetna Medicare Advantage Plan PPO/ESA (All Other Areas) | CIGNA Healthspring (AZ) | DC37 Med-Team Senior Care | Empire Medicare Related | Empire MediBlue Freedom (PPO) | GHI Senior Care | GHI HMO Medicare Senior Supplement | HIP VIP Premier (HMO) | Humana Gold Plus (FL) | United Healthcare Group Medicare Advantage Plan Horizons (NYC) | United Healthcare Group Medicare Advantage Plan Horizons (NJ) |
| Basic | \$0.00 | \$0.00 | \$98.48 | \$0.00 | \$114.91 | \$0.00 | \$0.00 | \$596.99 | \$0.00 | \$0.00 | \$120.06 | \$71.39 |
| Prescription Drugs | \$108.00 | \$79.00 | \$0.00 | \$0.00 | \$200.95 | \$127.79 | \$125.00 | \$85.00 | \$177.59 | \$50.40 | \$82.89 | \$109.38 |
| Rider Other* | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$2.83 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Total (Basic + Rider) | \$108.00 | \$79.00 | \$98.48 | \$0.00 | \$315.86 | \$127.79 | \$127.83 | \$681.99 | \$177.59 | \$50.40 | \$202.95 | \$180.77 |
| FAMILY | Aetna Medicare Advantage Plan PPO/ESA (NY/NJ/PA) | Aetna Medicare Advantage Plan PPO/ESA (All Other Areas) | CIGNA Healthspring (AZ) | DC37 Med-Team Senior Care | Empire Medicare Related | Empire MediBlue Freedom (PPO) | GHI Senior Care | GHI HMO Medicare Senior Supplement | HIP VIP Premier (HMO) | Humana Gold Plus (FL) | United Healthcare Group Medicare Advantage Plan Horizons (NYC) | United Healthcare Group Medicare Advantage Plan Horizons (NJ) |
| Basic | \$0.00 | \$0.00 | \$196.96 | \$0.00 | \$229.82 | \$0.00 | \$0.00 | \$1,193.98 | \$0.00 | \$0.00 | \$240.12 | \$142.78 |
| Prescription Drugs | \$216.00 | \$158.00 | \$0.00 | \$0.00 | \$401.90 | \$255.58 | \$250.00 | \$170.00 | \$355.18 | \$100.80 | \$165.78 | \$218.76 |
| Rider Other* | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$5.66 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Total (Basic + Rider) | \$216.00 | \$158.00 | \$196.96 | \$0.00 | \$631.72 | \$255.58 | \$255.66 | \$1,363.98 | \$355.18 | \$100.80 | \$405.90 | \$361.54 |

* For GHI Senior Care, "Rider Other" is for 365-Day Hospitalization.

NOTE: AvMed, BC Health Options & ElderPlan are "zero" premium plans.