

<b>MEDICAL RATES EFFECTIVE OCTOBER 2025</b>		<b>Total Retiree Cost (Monthly)</b>	<b>Total Retiree Cost (Annual)</b>	<b>Medical Reduced Retiree Rate Monthly (If you are enrolled in MEDICARE)</b>
<b>PPO 03769 Blue Options - Deduct \$500/\$1500 / OOP \$1500/\$4500 / Co-Ins 80/60 / RX\$5/\$35/\$35 / Office Co-pays \$15</b>				
	Retiree	\$ 930.00	\$ 11,160.00	Retiree Only/Medicare Enrolled: \$703.00
				Retiree Medicare Enrolled/Spouse No Medicare: \$1651.00
	Retiree + spouse or children	\$ 1,878.00	\$ 22,536.00	Retiree & Spouse Both Medicare Enrolled: \$1,366.00
	Retiree + Family	\$ 2,484.00	\$ 29,808.00	Retiree No Medicare/Spouse Medicare Enrolled: \$1,593.00
				N/A
<b>HMO (55) Blue Care - No Deduct / Inpatient Co-Pay \$250/admission / RX \$5/\$25/\$25 / Office Co-pays \$10</b>				
	Retiree	\$ 951.00	\$ 11,412.00	Retiree Only/Medicare Enrolled: \$718.00
				Retiree Medicare Enrolled/Spouse No Medicare: \$1,731.00
	Retiree + spouse or children	\$ 1,964.00	\$ 23,568.00	Retiree & Spouse Both Medicare Enrolled: \$1,427.00
	Retiree + Family	\$ 2,613.00	\$ 31,356.00	Retiree No Medicare/Spouse Medicare Enrolled: \$1,660.00
				N/A
<b>BCBS DENTAL RATES EFFECTIVE OCTOBER 2025</b>		<b>Retiree Cost (Monthly)</b>	<b>Retiree Cost (Annual)</b>	
<b>PPO Plan 1 - Plan Year MAX Benefit \$3,000/person</b>				
	Retiree	\$ 34.05	\$ 408.60	
	Retiree +Family	\$ 89.95	\$ 1,079.40	
<b>PPO Plan 2 - Plan Year MAX Benefit \$2,000/person</b>				
	Retiree	\$ 26.71	\$ 320.52	
	Retiree +Family	\$ 72.21	\$ 866.52	
<b>VISION RATES EFFECTIVE OCTOBER 2025</b>		<b>Retiree Cost (Monthly)</b>	<b>Retiree Cost (Annual)</b>	
	Retiree	\$ 5.24	\$ 62.88	
	Retiree + Spouse	\$ 9.83	\$ 117.96	
	Retiree + Children	\$ 8.18	\$ 98.16	
	Retiree + Family	\$ 16.19	\$ 194.28	