2019 Medical Premiums: Retiree or Survivor of Retiree With Medicare Part A and Part B Residing in California

RETIREES HIRED BEFORE JANUARY 9, 2009

2019 Monthly Medical Premiums	Kaiser Permanente HMO		UHC Medicare Advantage PPO		UHC Medicare Advantage PPO with Non-Medicare Dependents in Blue Shield of CA Trio HMO		UHC Medicare Advantage PPO with Non-Medicare Dependents in Blue Shield of CA Access+ HMO	
	City Contribution	Retiree/ Survivor Cost	City Contribution	Retiree/ Survivor Cost	City Contribution	Retiree/ Survivor Cost	City Contribution	Retiree/ Survivor Cost
Retiree/Survivor Only	\$333.99	\$0	\$379.78	\$0	\$379.78	\$0	\$379.78	\$0
Retiree/Survivor +1 Dependent with no Medicare	\$637.66	\$303.66	\$884.58	\$504.80	\$766.18	\$386.40	\$831.16	\$451.39
Retiree/Survivor +2 or More Dependents with no Medicare	\$637.66	\$807.74	\$884.58	\$1,267.60	\$766.18	\$1,003.29	\$831.16	\$1,172.01
Retiree/Survivor +1 Dependent with Medicare Part A and Part B	\$498.92	\$164.93	\$567.61	\$187.82	\$567.61	\$187.82	\$567.61	\$187.82
Retiree/Survivor +1 Dependent with Medicare Part A and B +1 or more Dependents	\$498.92	\$669.01	\$567.61	\$950.62	\$567.61	\$804.71	\$567.61	\$908.44

RETIREES HIRED AFTER JANUARY 9, 2009¹ WITH 10 AND LESS THAN 15 YEARS OF SERVICE

2019 Monthly Medical Premiums	Kaiser Permanente HMO		UHC Medicare Advantage PPO		UHC Medicare Advantage PPO with Non-Medicare Dependents in Blue Shield of CA Trio HMO		UHC Medicare Advantage PPO with Non-Medicare Dependents in Blue Shield of CA Access+ HMO	
	City Contribution	Retiree/ Survivor Cost	City Contribution	Retiree/ Survivor Cost	City Contribution	Retiree/ Survivor Cost	City Contribution	Retiree/ Survivor Cost
Retiree/Survivor Only	\$167.00	\$166.99	\$189.89	\$189.88	\$189.89	\$189.89	\$189.89	\$189.89
Retiree/Survivor +1 Dependent with no Medicare	\$318.83	\$622.49	\$442.29	\$947.09	\$383.09	\$769.49	\$415.58	\$866.97
Retiree/Survivor +2 or More Dependents with no Medicare	\$318.83	\$1,126.57	\$442.29	\$1,709.89	\$383.09	\$1,386.38	\$415.58	\$1,587.59
Retiree/Survivor +1 Dependent with Medicare Part A and Part B	\$249.46	\$414.39	\$283.81	\$471.62	\$283.81	\$471.62	\$283.81	\$471.62
Retiree/Survivor +1 Dependent with Medicare Part A and B +1 or more Dependents	\$249.46	\$918.47	\$283.81	\$1,234.42	\$283.81	\$1,088.51	\$283.81	\$1,192.24

¹Retirees or survivors of retirees with at least 5 years of service but less than 10 years of service have no city contribution and must pay the full premium rate.

2019 Medical Premiums: Retiree or Survivor of Retiree With Medicare Part A and Part B Residing Outside of California

RETIREES OR SURVIVORS OF RETIREES HIRED BEFORE JANUARY 9, 2009

	Kaiser Permanente Senior Advantage HMO							UHC Medicare	
2019 Monthly Medical Premiums	Northwest		Washington		Hawaii		Advantage PPO		
	City Contribution	Retiree/ Survivor Cost	City Contribution	Retiree/ Survivor Cost	City Contribution	Retiree/ Survivor Cost	City Contribution	Retiree/ Survivor Cost	
Retiree/Survivor Only	\$403.55	\$0	\$324.02	\$0	\$376.11	\$0	\$379.78	\$0	
Retiree/Survivor +1 Dependent with no Medicare	\$1,069.45	\$665.89	\$987.26	\$663.23	\$858.95	\$482.83	\$884.58	\$504.80	
Retiree/Survivor +2 or More Dependents with no Medicare	\$1,069.45	\$1,771.27	\$987.26	\$1,764.19	\$858.95	\$1,284.33	\$884.58	\$1,267.60	
Retiree/Survivor +1 Dependent with Medicare Part A and Part B	\$603.26	\$199.71	\$483.97	\$159.94	\$562.10	\$185.99	\$567.61	\$187.82	
Retiree/Survivor +1 Dependent with Medicare Part A and B +1 or more Dependents	\$603.26	\$1,305.09	\$483.97	\$1,260.90	\$562.10	\$987.49	\$567.61	\$950.62	

RETIREES OR SURVIVORS OF RETIREES HIRED AFTER JANUARY 9, 2009¹ WITH 10 AND LESS THAN 15 YEARS OF SERVICE

		UHC Medicare						
2019 Monthly Medical Premiums	Northwest		Washington		Hawaii		Advantage PPO	
	City Contribution	Retiree/ Survivor Cost						
Retiree/Survivor Only	\$201.78	\$201.77	\$162.01	\$162.01	\$188.06	\$188.05	\$189.89	\$189.89
Retiree/Survivor +1 Dependent with no Medicare	\$534.73	\$1,200.61	\$493.63	\$1,156.86	\$429.48	\$912.30	\$442.29	\$947.09
Retiree/Survivor +2 or More Dependents with no Medicare	\$534.73	\$2,305.99	\$493.63	\$2,257.82	\$429.48	\$1,713.80	\$442.29	\$1,709.89
Retiree/Survivor +1 Dependent with Medicare Part A and Part B	\$301.63	\$501.34	\$241.99	\$401.92	\$281.05	\$467.04	\$283.81	\$471.62
Retiree/Survivor +1 Dependent with Medicare Part A and B +1 or more Dependents	\$301.63	\$1,606.72	\$241.99	\$1,502.88	\$281.05	\$1,268.54	\$283.81	\$1,234.42

¹Retirees or survivors of retirees with at least 5 years of service but less than 10 years of service have no city contribution and must pay the full premium rate.