

## PRE-65 RETIREE RATES Effective: September 1, 2021-August 31, 2022

## **MEDICAL COVERAGE**

Coverage Tier	Monthly Premium		
	\$1,250 PLAN	\$2,500 PLAN	\$3,600 PLAN
Employee Only Employee + Spouse Employee + Child(ren) Family	\$892.73 \$1,874.75 \$1,651.60 \$2,517.30	\$669.77 \$1,406.55 \$1,214.80 \$1,851.59	\$669.77 \$1,406.55 \$1,214.80 \$1,851.59

## **DENTAL COVERAGE**

Coverage Tier	Monthly Premium	
	Dental Plan	
Employee Only	\$39.25	
Employee + Spouse	\$82.41	
Employee + Child(ren)	\$72.58	
Family	\$110.68	