



**Pre-65 Retiree Rates**  
**Effective: September 1, 2025-August 31, 2026**

MEDICAL COVERAGE		
Coverage Tier	Monthly Premium \$2,500 Plan	Monthly \$3,800 Plan
Employee Only	\$773.30	\$773.30
Employee + Spouse	\$1,623.87	\$1,623.87
Employee + Child(ren)	\$1,370.79	\$1,370.79
Family	\$2,052.68	\$2,052.68

DENTAL COVERAGE	
Coverage Tier	Monthly Premium
Employee Only	\$45.78
Employee + Spouse	\$96.13
Employee + Child(ren)	\$84.66
Family	\$129.12