Retiree Benefits Coverage Contributions

CALENDAR YEAR 2027

Pre-Medicare-Group 3*

PLAN	LEVEL OF COVERAGE	MONTHLY RETIREE CONTRIBUTION				
		FULL-TIME SALARY LEVEL 1	FULL-TIME SALARY LEVEL 2	FULL-TIME SALARY LEVEL 3	FULL-TIME SALARY LEVEL 4	PART-TIME
Blue Point2 POS A	● Individual	$602.01	$885.54	$1,038.38	$1,148.22	$1,148.22
	● 2 Person	$1,430.44	$1,928.37	$2,187.28	$2,477.80	$2,554.22
	● Family	$1,811.38	$2,701.64	$2,973.69	$2,973.69	$2,973.69
	● One Parent Family	$1,643.82	$2,238.17	$2,533.56	$2,666.74	$2,666.74
Blue Point2 POS B	● Individual	$470.62	$700.14	$828.44	$958.58	$1,076.21
	● 2 Person	$1,091.60	$1,505.73	$1,715.14	$1,953.60	$2,390.81
	● Family	$1,437.57	$2,165.55	$2,431.60	$2,737.04	$2,786.42
	● One Parent Family	$1,181.99	$1,579.81	$1,780.72	$2,027.83	$2,487.65
Blue Point2 POS D	● Individual	$47.61	$212.26	$292.77	$372.05	$459.64
	● 2 Person	$357.84	$499.64	$611.28	$745.60	$1,439.12
	● Family	$669.23	$904.28	$1,079.17	$1,257.52	$1,904.85
	● One Parent Family	$384.23	$563.78	$679.07	$822.89	$1,566.88
HDHP	● Individual	$42.28	$180.19	$259.44	$320.47	$334.88
	● 2 Person	$292.27	$427.30	$535.78	$666.60	$1,360.69
	● Family	$596.54	$824.40	$995.91	$1,170.16	$1,822.09
	● One Parent Family	$313.24	$485.79	$597.49	$737.45	$1,499.04
Blue PPO	● Individual	$370.99	$588.91	$711.14	$834.53	$1,024.11
(outside Rochester area)	● 2 Person	$868.53	$1,256.42	$1,452.22	$1,675.94	$2,234.54
	● Family	$1,321.31	$1,880.18	$2,130.67	$2,419.05	$2,740.61
	● One Parent Family	$939.01	$1,308.28	$1,494.38	$1,725.24	$2,322.65
Vision Care	● Individual	$9.64	$9.64	$9.64	$9.64	$9.64
(No new retiree enrollments after 2024)	● 2 Person	$19.26	$19.26	$19.26	$19.26	$19.26
	● Family	$31.01	$31.01	$31.01	$31.01	$31.01
Dental Coverage - Standard	● Individual	$33.03	$33.03	$33.03	$33.03	$33.03
	● 2 Person	$77.26	$77.26	$77.26	$77.26	$77.26
	● Family	$117.59	$117.59	$117.59	$117.59	$117.59
Dental Coverage - Enhanced	● Individual	$42.24	$42.24	$42.24	$42.24	$42.24
	● 2 Person	$100.22	$100.22	$100.22	$100.22	$100.22
	● Family	$153.03	$153.03	$153.03	$153.03	$153.03

**** NOTES ABOUT COST SHARING***

1) There are two pre-Medicare cost sharing groups as follows:
Group 2 is what was formerly known as the Benchmark group. These employees were hired before January 1, 2004 and were age 35 or over on January 1, 2008.
Group 3 is what was formerly known as the RMA group (Retiree Medical Account). These employees were hired on or after January 1, 2004 OR hired before January 1, 2004 and under age 35 on January 1, 2008.

2) For pre-Medicare retirees who retired prior to January 1, 2006, refer to Salary Level 2 for your contribution information. For retirees who retired on and after January 1, 2006, refer to the Salary Level you were in prior to retirement.