

**Retiree Benefits Rate Sheet
Under Age 65 (Non-Medicare Eligible)
Tarrant County – 2024**

Carefully read both front and back of this rate sheet. Use this rate sheet if the following statement applies to you:

You retired from Tarrant County before your 65th birthday and you will not turn age 65 during the month of January 2024; or you are planning to retire before your 65th birthday.

Important notice: Please use the Age 65 or Older Rate Sheet to determine your monthly premium cost if the following statements apply to you:

- ❖ If you are age 65 or older (or if you turn age 65 during the month of January 2024).
- ❖ If you are under 65 and enrolled in Medicare Part A and Part B due to a disability, you may be eligible for the MPO, MPD, PMA or PMD Plan.

Contact the Tarrant County Payroll and Benefits Service Center (PBSC) if you have any questions.

MEDICAL PLANS - PPO PLAN, HIGH DEDUCTIBLE PLAN (HDP) WITH HEALTH SAVINGS ACCOUNT (HSA)

If your retirement date is October 1, 2005, or later and you enroll in the PPO Plan or HDP Plan

The County contribution to your medical plan is based on your years of service with Tarrant County and the County contributes more toward retiree monthly medical plan premium cost for those retirees with at least ten years of service at Tarrant County. With more years of service at Tarrant County (based on the date you retire from the County), the County contributes more, and your medical premium is less. The County contributes zero for retirees with fewer than ten years of service. Your medical premium rates are shown in **Box 3 located on the back of this page**. To find your rate, first calculate your years of service with Tarrant County; then determine your premium rate based on the selected medical plan and coverage level.

Box 1 - Dental Rates – Retirees (Years of Service Not Applicable)

Box 2 – Vision Rates – Retirees (Years of Service Not Applicable)

Box 3 – HDP Plan/PPO Plan; Years of Service Premium Calculations (refer to the back of this form)

Box 1 - Dental Rates – Retirees (Years of Service Not Applicable)

Dental Option	Retiree Only	Retiree plus Spouse	Retiree plus Child(ren)	Retiree plus Family
ANT Delta Dental Care USA DHMO Plan	11.94	20.34	26.84	34.30
PEB PEBC PPO Dental Plan – Delta Dental DPPO	35.16	63.93	82.05	112.95

Box 2 – Vision Rates – Retirees (Years of Service Not Applicable)

Vision Option	Retiree Only	Retiree plus Spouse	Retiree plus Child(ren)	Retiree plus Family
VIS VSP Vision Plan	6.25	11.70	12.45	19.40

Box 3 – Retirement Date of October 1, 2005, or Later – Enrolling in PPO Plan or HDP

The chart below shows the monthly premium rates after application of the applicable **County %** contribution. If you cover your spouse, rates are subject to the Spouse Medical Plan Surcharge.

***Spouse Medical Plan Surcharge Affidavit Required**

Medical Option	Retiree Only	Retiree plus Spouse	Retiree plus Child(ren)	Retiree plus Family
0-9 Years of Service – County 0%				
HDP Plan	1,457.37	3,006.38*	2,194.09	3,509.74*
PPO Plan	1,376.17	2,844.18*	2,107.68	3,380.36*
10-14 Years of Service – County 25%				
HDP Plan	1,093.03	2,254.79*	1,645.57	2,632.31*
PPO Plan	1,032.13	2,133.14*	1,580.76	2,535.27*
15-19 Years of Service – County 45%				
HDP Plan	801.55	1,653.51*	1,206.75	1,930.36*
PPO Plan	756.89	1,564.30*	1,159.22	1,859.20*
20-24 Years of Service – County 60%				
HDP Plan	582.95	1,202.55*	877.64	1,403.90*
PPO Plan	550.47	1,137.67*	843.07	1,352.14*
25 + Years of Service – County 80%				
HDP Plan	291.47	601.28*	438.82	701.95*
PPO Plan	275.23	568.84*	421.54	676.07*

Sponsored Dependents Option (Surviving Dependents of Deceased Retirees)

Your medical plan rates are determined by the Retiree’s years of service with Tarrant County at the date of retirement. The cost of surviving spouse coverage is subject to the Spouse Medical Plan Surcharge and an Affidavit is required.

- For those enrolled in the HDP Plan or PPO Plan, eligible surviving spouses pay the Retiree rate; eligible spouse and dependents pay the Retiree + Child(ren) rate.
- If the retiree was enrolled in the PMA or PMD Plan at time of death, the monthly medical plan premium rates are based on retiree’s years of service at time of retirement.

Important information if you enroll in the High Deductible Plan (HDP) with Health Savings Account (HSA)

You must file IRS Form 8889 with your annual tax return to report contributions to and distributions from your HSA. HSA contributions, investment earnings (if any) and withdrawals (if made for qualified medical expenses) are generally not taxable for federal (and, in most cases, state and local) income tax purposes. However, under certain circumstances, your HSA may be subject to taxes and/or penalties. And, if your HSA contributions for any year exceed the annual limit, you are responsible for contacting your bank to request a refund of the excess. Be sure to save receipts for all withdrawals from your HSA. You are responsible for verifying eligible medical expenses under the IRS tax code. Some of your responsibilities include:

- Tracking contribution limits and withdrawing any excess contributions
- Making sure funds are transferred to a qualified HSA, and
- Identifying tax implications and reporting distributions to the IRS.

Once your account is open, contact your bank for detailed information about eligible expenses and your responsibilities regarding contributions and record keeping. Your employer cannot provide you tax advice. If you enroll in Medicare, you are no longer eligible to contribute to an HSA; however, you can use the funds already in your HSA for qualified medical expenses (see IRS Publication 969). Contact the IRS or consult with a qualified tax advisor for specific advice about your situation.