

## Retiree Health Benefits Rate Sheet Age 65 or Older Denton County - 2022

### Important Information about Retiree Rates

Denton County adopted a years-of-service Retiree medical premium model effective January 1, 2013. **If you retired on or before December 31, 2012**, use **Box 1** below to determine your monthly medical premium cost.

**If you retired January 1, 2013 or later**, you will pay a greater share of your retiree medical premium based on the number of years you worked for Denton County. This means the County contributes toward retiree medical premium for those with eight (8) years or more of service at Denton County. The County contributes a larger share based on years of service. Use **Box 4** (on the back of this form) to determine your monthly medical premium cost.

Years of service does not impact the cost of dental or vision coverage. If you are eligible to enroll in a dental or vision plan, use **Box 2** and/or **Box 3** below to determine your monthly premium cost.

**To determine your monthly retiree health premium cost, select from the boxes listed below.**

**Box 1 - Medical Plans; Retired on or before December 31, 2012**

**Box 2 - Dental Plans**

**Box 3 - Vision Plan**

**Box 4 - Medical Plans; retired on or after January 1, 2013 (see back of this form for medical rates)**

### Medical Plan Choices

#### **MPO - UnitedHealthcare Group Medicare Advantage (PPO)**

If you enroll in the MPO Plan, but your spouse and/or dependent(s) are not eligible for Medicare, select the **MPD** Plan for all of you. With the MPD Plan, your non-Medicare spouse and/or eligible dependents are enrolled in the PEBC PPO Plan and you are enrolled in the UnitedHealthcare Medicare Advantage (PPO).

#### **PMA – UnitedHealthcare Group Medicare Advantage (HMO)**

If you enroll in the PMA Plan, but your spouse and/or dependent(s) are not eligible for Medicare, select the **PMD** Plan for all of you. With the PMD Plan, your non-Medicare spouse and/or eligible dependent(s) are enrolled in the PEBC PPO Plan and you are enrolled in the UnitedHealthcare Group Medicare Advantage (HMO).

### **Box 1 – Age-65-or-Older Retiree with Retirement Date of December 31, 2012 or Before**

*\*Spouse Medical Plan Surcharge Affidavit required for PMD and MPD spouse enrollment*

Medical Option <i>MPO and PMA- Retiree/spouse must be enrolled in both Medicare Part A and Part B</i>	Retiree Only	Retiree plus Spouse	Retiree plus Child(ren)	Retiree plus Family
<b>MPO</b> UnitedHealthcare Group Medicare Advantage (PPO)	135.30	270.61	N/A	N/A
<b>MPD*</b> Retiree enrolled in MPO and non-Medicare Spouse and/or Dependents enrolled in PEBC PPO Plan	N/A	772.80*	490.98	1,155.29*
<b>MPD</b> with Spouse enrolled in Medicare Part A & Part B				626.28
<b>PMA</b> UnitedHealthcare Group Medicare Advantage (HMO)	69.86	139.72	N/A	N/A
<b>PMD*</b> Retiree enrolled in PMA and non-Medicare Spouse and/or Dependents enrolled in PEBC PPO Plan	N/A	707.35*	425.54	1,089.84*
<b>PMD</b> with Spouse enrolled in Medicare Part A & Part B				495.39

### **Box 2 - Dental Rates – Retirees (Regardless of Retirement Date)**

Dental Option	Retiree Only	Retiree Plus Spouse	Retiree Plus Child(ren)	Retiree Plus Family
<b>ANT</b> Delta Care USA DHMO Plan	11.94	20.34	26.84	34.30
<b>PEB</b> PEBC PPO Dental Plan – Delta Dental	33.41	60.74	75.94	106.30

### **Box 3 – Vision Rates – Retirees (Regardless of Retirement Date)**

Vision Option	Retiree Only	Retiree Plus Spouse	Retiree Plus Child(ren)	Retiree Plus Family
<b>VIS</b> VSP Vision Plan – High Option	6.25	11.70	12.45	19.40
<b>VLO</b> VSP Vision Plan – Low Option	3.95	7.40	7.90	12.30

**Box 4 – Age-65-or-Older Retiree with Retirement Date of January 1, 2013 or Later**

If you retired January 1, 2013 or later, the County contribution toward your medical benefits is based on a percentage of the total premium determined by your years of service at Denton County. The chart below shows the monthly premium rates after application of the applicable **County %** contribution.

**\*Spouse Medical Plan Surcharge Affidavit required for PMD and MPD spouse enrollment**

<b>Medical Option</b> MPO and PMA require that retiree is enrolled in both Medicare Part A and Part B	<b>Retiree Only</b>	<b>Retiree Plus Spouse</b>	<b>Retiree Plus Child(ren)</b>	<b>Retiree Plus Family</b>
<b>0 – 7 Years of Service – County Pays 0%</b>				
MPO	451.01	902.02	N/A	N/A
MPD*	N/A	2,575.99*	1,636.60	3,850.95*
MPD – Medicare Spouse				2,087.61
PMA	232.86	465.72	N/A	N/A
PMD*	N/A	2,357.84*	1,418.45	3,632.80*
PMD – Medicare Spouse				1,651.31
<b>8 – 11 Years of Service – County Pays 25%</b>				
MPO	338.26	676.52	N/A	N/A
MPD*	N/A	1,931.99*	1,227.45	2,888.21*
MPD – Medicare Spouse				1,565.71
PMA	174.65	349.29	N/A	N/A
PMD*	N/A	1,768.38*	1,063.84	2,724.60*
PMD – Medicare Spouse				1,238.48
<b>12 - 14 Years of Service – County Pays 50%</b>				
MPO	225.51	451.01	N/A	N/A
MPD*	N/A	1,288.00*	818.30	1,925.48*
MPD – Medicare Spouse				1,043.81
PMA	116.43	232.86	N/A	N/A
PMD*	N/A	1,178.92*	709.23	1,816.40*
PMD – Medicare Spouse				825.66
<b>15 or More Years of Service – County Pays 70%</b>				
MPO	135.30	270.61	N/A	N/A
MPD*	N/A	772.80*	490.98	1,155.29*
MPD – Medicare Spouse				626.28
PMA	69.86	139.72	N/A	N/A
PMD*	N/A	707.35*	425.54	1,089.84*
PMD – Medicare Spouse				495.39
<b>20 or More Years of Service – County Pays 85%</b>				
MPO	67.65	135.30	N/A	N/A
MPD*	N/A	386.40*	245.49	577.64*
MPD – Medicare Spouse				313.14
PMA	34.93	69.86	N/A	N/A
PMD*	N/A	353.68*	212.77	544.92*
PMD – Medicare Spouse				247.70

**Sponsored Dependents Option (Surviving Dependents of Deceased Retirees)**

Your medical plan rates are determined by the Retiree’s years of service with Denton County at the date of retirement. Those enrolled in PMD or MPD are subject to Spouse Medical Plan Surcharge with Affidavit required.

Contact the County Human Resources Department if you have any questions regarding your eligibility or premium rates.