

Monthly Retiree Health Insurance Rates January 1 through December 31, 2018



Retiree Under 65 (non Medicare eligible): **Kaiser Permanente HMO**

	2018 Monthly Retiree Rate	2018 Monthly Dependent Rate	2018 TOTAL Monthly Retiree and Dependent Rate	2018 Monthly APS Contribution	2018 Total Monthly Rate**	2017 TOTAL Monthly Retiree and Dependent Rate
Retiree under 65						
<i>Retiree enrolled with Kaiser HMO</i>						
20+ Years	\$116.53	n/a	\$116.53	\$413.15	\$529.68	\$119.27
15 - 19 Years	\$264.84	n/a	\$264.84	\$264.84	\$529.68	\$259.27
10 - 14 Years	\$370.78	n/a	\$370.78	\$158.90	\$529.68	\$362.98
5 - 9 Years	\$476.71	n/a	\$476.71	\$52.97	\$529.68	\$466.69
Retiree under 65, Spouse under 65						
<i>Retiree & Spouse enrolled with Kaiser HMO</i>						
20+ Years	\$385.47	n/a	\$385.47	\$700.36	\$1,085.83	\$388.01
15 - 19 Years	\$597.21	n/a	\$597.21	\$488.62	\$1,085.83	\$584.67
10 - 14 Years	\$814.37	n/a	\$814.37	\$271.46	\$1,085.83	\$797.27
5 - 9 Years	\$977.25	n/a	\$977.25	\$108.58	\$1,085.83	\$956.73
Retiree under 65, and Child(ren)						
<i>Retiree and Child(ren) enrolled with Kaiser HMO</i>						
20+ Years	\$347.86	n/a	\$347.86	\$632.04	\$979.90	\$350.15
15 - 19 Years	\$538.94	n/a	\$538.94	\$440.96	\$979.90	\$527.63
10 - 14 Years	\$734.92	n/a	\$734.92	\$244.98	\$979.90	\$719.49
5 - 9 Years	\$881.91	n/a	\$881.91	\$97.99	\$979.90	\$863.39
Retiree under 65, Spouse under 65, and Child(ren)						
<i>Retiree, Spouse, and Child(ren) enrolled with Kaiser HMO</i>						
20+ Years	\$630.84	n/a	\$630.84	\$958.19	\$1,589.03	\$633.15
15 - 19 Years	\$953.42	n/a	\$953.42	\$635.61	\$1,589.03	\$933.39
10 - 14 Years	\$1,271.22	n/a	\$1,271.22	\$317.81	\$1,589.03	\$1,244.52
5 - 9 Years	\$1,430.13	n/a	\$1,430.13	\$158.90	\$1,589.03	\$1,400.08
Retiree under 65, Spouse 65+						
<i>Retiree enrolled with Kaiser HMO, Spouse enrolled with Kaiser Medicare Plus</i>						
20+ Years	\$116.53	\$150.56	\$267.09	\$563.72	\$830.81	\$265.45
15 - 19 Years	\$264.84	\$180.69	\$445.53	\$385.28	\$830.81	\$434.70
10 - 14 Years	\$370.78	\$240.90	\$611.68	\$219.13	\$830.81	\$596.87
5 - 9 Years	\$476.71	\$271.02	\$747.73	\$83.08	\$830.81	\$729.81
Retiree under 65, and Child(ren), Spouse 65+						
<i>Retiree and Child(ren) enrolled with Kaiser HMO, Spouse enrolled with Kaiser Medicare Plus</i>						
20+ Years	\$347.86	\$150.56	\$498.42	\$782.61	\$1,281.03	\$496.33
15 - 19 Years	\$538.94	\$180.68	\$719.62	\$561.41	\$1,281.03	\$703.05
10 - 14 Years	\$734.92	\$240.90	\$975.82	\$305.21	\$1,281.03	\$953.38
5 - 9 Years	\$881.91	\$271.02	\$1,152.93	\$128.10	\$1,281.03	\$1,126.51

**If a covered retiree dies, the surviving spouse and/or dependent children may continue coverage by paying the full cost of the premium by personal check. If the surviving spouse also is a retiree of Arlington Public Schools, he or she may elect to continue coverage with the School Board's contribution computed based on the surviving spouse's service.

Monthly Retiree Health Insurance Rates January 1 through December 31, 2018



Retiree 65+ (and Medicare eligible): **Kaiser Permanente Medicare Plus**
Spouse and/or Dependent Children: **Kaiser Permanente HMO**

	2018 Monthly Retiree Rate	2018 Monthly Dependent Rate	2018 TOTAL Monthly Retiree and Dependent Rate	2018 Monthly APS Contribution	2018 Total Monthly Rate **	2017 TOTAL Monthly Retiree and Dependent Rate
Retiree 65+						
<i>Retiree enrolled with Kaiser Medicare Plus</i>						
20+ Years	\$66.25	n/a	\$66.25	\$234.88	\$301.13	\$67.24
15 - 19 Years	\$150.56	n/a	\$150.56	\$150.57	\$301.13	\$146.18
10 - 14 Years	\$210.79	n/a	\$210.79	\$90.34	\$301.13	\$204.65
5 - 9 Years	\$271.02	n/a	\$271.02	\$30.11	\$301.13	\$263.12
Retiree 65+ and Spouse under 65						
<i>Retiree enrolled with Kaiser Medicare Plus, Spouse enrolled with Kaiser HMO</i>						
20+ Years	\$66.25	\$264.84	\$331.09	\$499.72	\$830.81	\$326.52
15 - 19 Years	\$150.56	\$317.81	\$468.37	\$362.44	\$830.81	\$457.31
10 - 14 Years	\$210.79	\$423.74	\$634.53	\$196.28	\$830.81	\$619.49
5 - 9 Years	\$271.02	\$476.71	\$747.73	\$83.08	\$830.81	\$729.81
Retiree 65+ and 1 Child						
<i>Retiree enrolled with Kaiser Medicare Plus, Child enrolled with Kaiser HMO</i>						
20+ Years	\$66.25	\$264.84	\$331.09	\$499.72	\$830.81	\$326.52
15 - 19 Years	\$150.56	\$317.81	\$468.37	\$362.44	\$830.81	\$457.31
10 - 14 Years	\$210.79	\$423.74	\$634.53	\$196.28	\$830.81	\$619.49
5 - 9 Years	\$271.02	\$476.71	\$747.73	\$83.08	\$830.81	\$729.81
Retiree 65+ and 2 or more Children						
<i>Retiree enrolled with Kaiser Medicare Plus, Children enrolled with Kaiser HMO</i>						
20+ Years	\$66.25	\$489.95	\$556.20	\$724.83	\$1,281.03	\$546.90
15 - 19 Years	\$150.56	\$587.94	\$738.50	\$542.53	\$1,281.03	\$721.77
10 - 14 Years	\$210.79	\$783.92	\$994.71	\$286.32	\$1,281.03	\$972.11
5 - 9 Years	\$271.02	\$881.91	\$1,152.93	\$128.10	\$1,281.03	\$1,126.51
Retiree 65+, Spouse under 65, and Child(ren)						
<i>Retiree enrolled with Kaiser Medicare Plus, Spouse enrolled with Kaiser HMO, Child(ren) enrolled with Kaiser HMO</i>						
20+ Years	\$66.25	\$489.95	\$556.20	\$724.83	\$1,281.03	\$546.90
15 - 19 Years	\$150.56	\$587.94	\$738.50	\$542.53	\$1,281.03	\$721.77
10 - 14 Years	\$210.79	\$783.92	\$994.71	\$286.32	\$1,281.03	\$972.11
5 - 9 Years	\$271.02	\$881.91	\$1,152.93	\$128.10	\$1,281.03	\$1,126.51
Retiree 65+ and Spouse 65+						
<i>Retiree enrolled with Kaiser Medicare Plus, Spouse enrolled with Kaiser Medicare Plus</i>						
20+ Years	\$66.25	\$150.56	\$216.81	\$385.45	\$602.26	\$213.42
15 - 19 Years	\$150.56	\$180.68	\$331.24	\$271.02	\$602.26	\$321.60
10 - 14 Years	\$210.79	\$240.90	\$451.69	\$150.57	\$602.26	\$438.54
5 - 9 Years	\$271.02	\$271.02	\$542.04	\$60.22	\$602.26	\$526.24
Retiree 65+, Spouse 65+, and 1 Child						
<i>Retiree enrolled w/ Kaiser Medicare Plus, Spouse enrolled w/ Kaiser Medicare Plus, 1 Child enrolled w/ Kaiser HMO</i>						
20+ Years	\$66.25	\$415.40	\$481.65	\$650.29	\$1,131.94	\$472.69
15 - 19 Years	\$150.56	\$498.49	\$649.05	\$482.89	\$1,131.94	\$632.73
10 - 14 Years	\$210.79	\$664.65	\$875.44	\$256.50	\$1,131.94	\$853.38
5 - 9 Years	\$271.02	\$747.73	\$1,018.75	\$113.19	\$1,131.94	\$992.94
Retiree 65+, Spouse 65+, and 2 or more Children						
<i>Retiree enrolled w/ Kaiser Medicare Plus, Spouse enrolled w/ Kaiser Medicare Plus, Children enrolled w/ Kaiser HMO</i>						
20+ Years	\$66.25	\$640.51	\$706.76	\$875.40	\$1,582.16	\$707.70
15 - 19 Years	\$150.56	\$768.62	\$919.18	\$662.98	\$1,582.16	\$897.19
10 - 14 Years	\$210.79	\$1,024.82	\$1,235.61	\$346.55	\$1,582.16	\$1,205.99
5 - 9 Years	\$271.02	\$1,152.93	\$1,423.95	\$158.21	\$1,582.16	\$1,389.63
Retiree 65+, Spouse 65+, and 1 Medicare-Eligible Child						
<i>Retiree enrolled w/ Kaiser Medicare Plus, Spouse enrolled w/ Kaiser Medicare Plus, and Child enrolled with Kaiser Medicare Plus</i>						
20+ Years	\$66.25	\$301.13	\$367.38	\$536.01	\$903.39	\$359.60
15 - 19 Years	\$150.56	\$361.36	\$511.92	\$391.47	\$903.39	\$497.01
10 - 14 Years	\$210.79	\$481.81	\$692.60	\$210.79	\$903.39	\$672.43
5 - 9 Years	\$271.02	\$542.03	\$813.05	\$90.34	\$903.39	\$789.37

**If a covered retiree dies, the surviving spouse and/or dependent children may continue coverage by paying the full cost of the premium by personal check. If the surviving spouse also is a retiree of Arlington Public Schools, he or she may elect to continue coverage with the School Board's contribution computed based on the surviving spouse's service.

Monthly Retiree Health Insurance Rates January 1 through December 31, 2018



Retiree Under 65 (non Medicare eligible): **Cigna Low Option**

	2018 Monthly Retiree Rate	2018 Monthly Dependent Rate	2018 TOTAL Monthly Retiree and Dependent Rate	2018 Monthly APS Contribution	2018 Total Monthly Rate**	2017 TOTAL Monthly Retiree and Dependent Rate
Retiree under 65						
<i>Retiree enrolled with Cigna LOW</i>						
20+ Years	\$137.68	n/a	\$137.68	\$391.84	\$529.52	\$143.76
15 - 19 Years	\$264.76	n/a	\$264.76	\$264.76	\$529.52	\$256.72
10 - 14 Years	\$370.66	n/a	\$370.66	\$158.86	\$529.52	\$359.41
5 - 9 Years	\$476.57	n/a	\$476.57	\$52.95	\$529.52	\$462.10
Retiree under 65, Spouse under 65						
<i>Retiree & Spouse enrolled with Cigna LOW</i>						
20+ Years	\$433.67	n/a	\$433.67	\$678.31	\$1,111.98	\$420.50
15 - 19 Years	\$611.59	n/a	\$611.59	\$500.39	\$1,111.98	\$593.02
10 - 14 Years	\$833.99	n/a	\$833.99	\$278.00	\$1,111.99	\$808.66
5 - 9 Years	\$1,000.78	n/a	\$1,000.78	\$111.20	\$1,111.98	\$970.39
Retiree under 65, and Child(ren)						
<i>Retiree and Child(ren) enrolled with Cigna LOW</i>						
20+ Years	\$392.37	n/a	\$392.37	\$613.71	\$1,006.08	\$380.45
15 - 19 Years	\$553.34	n/a	\$553.34	\$452.74	\$1,006.08	\$536.54
10 - 14 Years	\$754.56	n/a	\$754.56	\$251.52	\$1,006.08	\$731.64
5 - 9 Years	\$905.47	n/a	\$905.47	\$100.61	\$1,006.08	\$877.97
Retiree under 65, Spouse under 65, and Child(ren)						
<i>Retiree, Spouse, and Child(ren) enrolled with Cigna LOW</i>						
20+ Years	\$667.19	n/a	\$667.19	\$921.36	\$1,588.55	\$646.93
15 - 19 Years	\$953.13	n/a	\$953.13	\$635.42	\$1,588.55	\$924.18
10 - 14 Years	\$1,270.84	n/a	\$1,270.84	\$317.71	\$1,588.55	\$1,232.24
5 - 9 Years	\$1,429.69	n/a	\$1,429.69	\$158.86	\$1,588.55	\$1,386.27
Retiree under 65, Spouse 65+						
<i>Retiree enrolled with Cigna LOW, Spouse enrolled with United Healthcare</i>						
20+ Years	\$137.68	\$205.57	\$343.25	\$597.42	\$940.67	\$337.70
15 - 19 Years	\$264.76	\$246.69	\$511.45	\$429.22	\$940.67	\$489.45
10 - 14 Years	\$370.66	\$328.92	\$699.58	\$241.09	\$940.67	\$669.71
5 - 9 Years	\$476.57	\$370.03	\$846.60	\$94.07	\$940.67	\$811.19
Retiree under 65, and Child(ren), Spouse 65+						
<i>Retiree and Child(ren) enrolled with Cigna LOW, Spouse enrolled with United Healthcare</i>						
20+ Years	\$392.37	\$205.57	\$597.94	\$819.29	\$1,417.23	\$574.39
15 - 19 Years	\$553.34	\$246.69	\$800.03	\$617.20	\$1,417.23	\$769.27
10 - 14 Years	\$754.56	\$328.92	\$1,083.48	\$333.75	\$1,417.23	\$1,041.94
5 - 9 Years	\$905.47	\$370.03	\$1,275.50	\$141.73	\$1,417.23	\$1,227.06

**If a covered retiree dies, the surviving spouse and/or dependent children may continue coverage by paying the full cost of the premium by personal check. If the surviving spouse also is a retiree of Arlington Public Schools, he or she may elect to continue coverage with the School Board's contribution computed based on the surviving spouse's service.

Monthly Retiree Health Insurance Rates January 1 through December 31, 2018



Retiree 65+ (and Medicare eligible): **United Healthcare Senior Supplement with Prescription Drug Plan**
Spouse and/or Dependent Children: **Cigna Low Option**

	2018 Monthly Retiree Rate	2018 Monthly Dependent Rate	2018 TOTAL Monthly Retiree and Dependent Rate	2018 Monthly APS Contribution	2018 Total Monthly Rate**	2017 TOTAL Monthly Retiree and Dependent Rate
Retiree 65+						
<i>Retiree enrolled with United Healthcare</i>						
20+ Years	\$115.12	n/a	\$115.12	\$296.03	\$411.15	\$108.61
15 - 19 Years	\$205.57	n/a	\$205.57	\$205.58	\$411.15	\$193.94
10 - 14 Years	\$287.80	n/a	\$287.80	\$123.35	\$411.15	\$271.52
5 - 9 Years	\$370.03	n/a	\$370.03	\$41.12	\$411.15	\$349.09
Retiree 65+ and Spouse under 65						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with Cigna LOW</i>						
20+ Years	\$115.12	\$264.76	\$379.88	\$560.79	\$940.67	\$365.33
15 - 19 Years	\$205.57	\$317.71	\$523.28	\$417.39	\$940.67	\$502.00
10 - 14 Years	\$287.80	\$423.62	\$711.42	\$229.25	\$940.67	\$682.27
5 - 9 Years	\$370.03	\$476.57	\$846.60	\$94.07	\$940.67	\$811.19
Retiree 65+ and 1 Child						
<i>Retiree enrolled with United Healthcare, Child enrolled with Cigna LOW</i>						
20+ Years	\$115.12	\$264.76	\$379.88	\$560.79	\$940.67	\$365.33
15 - 19 Years	\$205.57	\$317.71	\$523.28	\$417.39	\$940.67	\$502.00
10 - 14 Years	\$287.80	\$423.62	\$711.42	\$229.25	\$940.67	\$682.27
5 - 9 Years	\$370.03	\$476.57	\$846.60	\$94.07	\$940.67	\$811.19
Retiree 65+ and 2 or more Children						
<i>Retiree enrolled with United Healthcare, Children enrolled with Cigna LOW</i>						
20+ Years	\$115.12	\$503.05	\$618.17	\$799.06	\$1,417.23	\$596.38
15 - 19 Years	\$205.57	\$603.65	\$809.22	\$608.01	\$1,417.23	\$779.25
10 - 14 Years	\$287.80	\$804.86	\$1,092.66	\$324.57	\$1,417.23	\$1,051.94
5 - 9 Years	\$370.03	\$905.47	\$1,275.50	\$141.73	\$1,417.23	\$1,227.06
Retiree 65+, Spouse under 65, and Child(ren)						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with Cigna LOW, Child(ren) enrolled with Cigna LOW</i>						
20+ Years	\$115.12	\$503.05	\$618.17	\$799.06	\$1,417.23	\$596.38
15 - 19 Years	\$205.57	\$603.65	\$809.22	\$608.01	\$1,417.23	\$779.25
10 - 14 Years	\$287.80	\$804.86	\$1,092.66	\$324.57	\$1,417.23	\$1,051.94
5 - 9 Years	\$370.03	\$905.47	\$1,275.50	\$141.73	\$1,417.23	\$1,227.06
Retiree 65+ and Spouse 65+						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with United Healthcare</i>						
20+ Years	\$115.12	\$205.57	\$320.69	\$501.61	\$822.30	\$302.55
15 - 19 Years	\$205.57	\$246.69	\$452.26	\$370.04	\$822.30	\$426.67
10 - 14 Years	\$287.80	\$328.92	\$616.72	\$205.58	\$822.30	\$581.82
5 - 9 Years	\$370.03	\$370.03	\$740.06	\$82.24	\$822.30	\$698.18
Retiree 65+, Spouse 65+, and 1 Child						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with United Healthcare, 1 Child enrolled with Cigna LOW</i>						
20+ Years	\$115.12	\$470.33	\$585.45	\$766.37	\$1,351.82	\$559.27
15 - 19 Years	\$205.57	\$564.40	\$769.97	\$581.85	\$1,351.82	\$734.73
10 - 14 Years	\$287.80	\$752.54	\$1,040.34	\$311.48	\$1,351.82	\$992.58
5 - 9 Years	\$370.03	\$846.60	\$1,216.63	\$135.19	\$1,351.82	\$1,160.28
Retiree 65+, Spouse 65+, and 2 or more Children						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with United Healthcare, Children enrolled with Cigna LOW</i>						
20+ Years	\$115.12	\$708.61	\$823.73	\$1,004.65	\$1,828.38	\$790.31
15 - 19 Years	\$205.57	\$850.34	\$1,055.91	\$772.47	\$1,828.38	\$1,011.98
10 - 14 Years	\$287.80	\$1,133.78	\$1,421.58	\$406.80	\$1,828.38	\$1,362.24
5 - 9 Years	\$370.03	\$1,291.68	\$1,661.71	\$166.67	\$1,828.38	\$1,584.61
Retiree 65+, Spouse 65+, and 1 Medicare-Eligible Child						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with United Healthcare, Child enrolled with United Healthcare</i>						
20+ Years	\$115.12	\$411.15	\$526.27	\$707.18	\$1,233.45	\$496.49
15 - 19 Years	\$205.57	\$493.38	\$698.95	\$534.50	\$1,233.45	\$659.40
10 - 14 Years	\$287.80	\$657.84	\$945.64	\$287.81	\$1,233.45	\$892.13
5 - 9 Years	\$370.03	\$740.07	\$1,110.10	\$123.35	\$1,233.45	\$1,047.27

**If a covered retiree dies, the surviving spouse and/or dependent children may continue coverage by paying the full cost of the premium by personal check. If the surviving spouse also is a retiree of Arlington Public Schools, he or she may elect to continue coverage with the School Board's contribution computed based on the surviving spouse's service.

Monthly Retiree Health Insurance Rates January 1 through December 31, 2018



Retiree Under 65 (non Medicare eligible): **Cigna High Option**

	2018 Monthly Retiree Rate	2018 Monthly Dependent Rate	2018 TOTAL Monthly Retiree and Dependent Rate	2018 Monthly APS Contribution	2018 Total Monthly Rate**	2017 TOTAL Monthly Retiree and Dependent Rate
Retiree under 65						
Retiree enrolled with Cigna HIGH						
20+ Years	\$248.30	n/a	\$248.30	\$527.64	\$775.94	\$240.76
15 - 19 Years	\$387.97	n/a	\$387.97	\$387.97	\$775.94	\$376.18
10 - 14 Years	\$543.16	n/a	\$543.16	\$232.78	\$775.94	\$526.66
5 - 9 Years	\$698.35	n/a	\$698.35	\$77.59	\$775.94	\$677.13
Retiree under 65, Spouse under 65						
Retiree & Spouse enrolled with Cigna HIGH						
20+ Years	\$668.07	n/a	\$668.07	\$961.38	\$1,629.45	\$647.78
15 - 19 Years	\$896.20	n/a	\$896.20	\$733.25	\$1,629.45	\$868.98
10 - 14 Years	\$1,222.09	n/a	\$1,222.09	\$407.36	\$1,629.45	\$1,184.97
5 - 9 Years	\$1,466.50	n/a	\$1,466.50	\$162.95	\$1,629.45	\$1,421.96
Retiree under 65, and Child(ren)						
Retiree and Child(ren) enrolled with Cigna HIGH						
20+ Years	\$604.45	n/a	\$604.45	\$869.83	\$1,474.28	\$586.09
15 - 19 Years	\$810.85	n/a	\$810.85	\$663.43	\$1,474.28	\$786.22
10 - 14 Years	\$1,105.71	n/a	\$1,105.71	\$368.57	\$1,474.28	\$1,072.12
5 - 9 Years	\$1,326.85	n/a	\$1,326.85	\$147.43	\$1,474.28	\$1,286.55
Retiree under 65, Spouse under 65, and Child(ren)						
Retiree, Spouse, and Child(ren) enrolled with Cigna HIGH						
20+ Years	\$1,127.80	n/a	\$1,127.80	\$1,200.00	\$2,327.80	\$1,057.10
15 - 19 Years	\$1,494.47	n/a	\$1,494.47	\$833.33	\$2,327.80	\$1,423.77
10 - 14 Years	\$1,862.24	n/a	\$1,862.24	\$465.56	\$2,327.80	\$1,805.68
5 - 9 Years	\$2,161.13	n/a	\$2,161.13	\$166.67	\$2,327.80	\$2,090.43
Retiree under 65, Spouse 65+						
Retiree enrolled with Cigna HIGH, Spouse enrolled with United Healthcare						
20+ Years	\$248.30	\$205.57	\$453.87	\$733.22	\$1,187.09	\$434.70
15 - 19 Years	\$387.97	\$246.69	\$634.66	\$552.43	\$1,187.09	\$608.91
10 - 14 Years	\$543.16	\$328.92	\$872.08	\$315.01	\$1,187.09	\$836.96
5 - 9 Years	\$698.35	\$370.03	\$1,068.38	\$118.71	\$1,187.09	\$1,026.22
Retiree under 65, and Child(ren), Spouse 65+						
Retiree and Child(ren) enrolled with Cigna HIGH, Spouse enrolled with United Healthcare						
20+ Years	\$604.45	\$205.57	\$810.02	\$1,075.41	\$1,885.43	\$780.03
15 - 19 Years	\$810.85	\$246.69	\$1,057.54	\$827.89	\$1,885.43	\$1,018.95
10 - 14 Years	\$1,105.71	\$328.92	\$1,434.63	\$450.80	\$1,885.43	\$1,382.42
5 - 9 Years	\$1,326.85	\$391.91	\$1,718.76	\$166.67	\$1,885.43	\$1,650.71

**If a covered retiree dies, the surviving spouse and/or dependent children may continue coverage by paying the full cost of the premium by personal check. If the surviving spouse also is a retiree of Arlington Public Schools, he or she may elect to continue coverage with the School Board's contribution computed based on the surviving spouse's service.

Monthly Retiree Health Insurance Rates January 1 through December 31, 2018



Retiree 65+ (and Medicare eligible): **United Healthcare Senior Supplement with Prescription Drug Plan**
Spouse and/or Dependent Children: **Cigna High Option**

	2018 Monthly Retiree Rate	2018 Monthly Dependent Rate	2018 TOTAL Monthly Retiree and Dependent Rate	2018 Monthly APS Contribution	2018 Total Monthly Rate**	2017 TOTAL Monthly Retiree and Dependent Rate
Retiree 65+						
<i>Retiree enrolled with United Healthcare</i>						
20+ Years	\$115.12	n/a	\$115.12	\$296.03	\$411.15	\$108.61
15 - 19 Years	\$205.57	n/a	\$205.57	\$205.58	\$411.15	\$193.94
10 - 14 Years	\$287.80	n/a	\$287.80	\$123.35	\$411.15	\$271.52
5 - 9 Years	\$370.03	n/a	\$370.03	\$41.12	\$411.15	\$349.09
Retiree 65+ and Spouse under 65						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with Cigna HIGH</i>						
20+ Years	\$115.12	\$387.97	\$503.09	\$684.00	\$1,187.09	\$484.79
15 - 19 Years	\$205.57	\$465.56	\$671.13	\$515.96	\$1,187.09	\$645.36
10 - 14 Years	\$287.80	\$620.75	\$908.55	\$278.54	\$1,187.09	\$873.42
5 - 9 Years	\$370.03	\$698.35	\$1,068.38	\$118.71	\$1,187.09	\$1,026.22
Retiree 65+ and 1 Child						
<i>Retiree enrolled with United Healthcare, Child enrolled with Cigna HIGH</i>						
20+ Years	\$115.12	\$387.97	\$503.09	\$684.00	\$1,187.09	\$484.79
15 - 19 Years	\$205.57	\$465.56	\$671.13	\$515.96	\$1,187.09	\$645.36
10 - 14 Years	\$287.80	\$620.75	\$908.55	\$278.54	\$1,187.09	\$873.42
5 - 9 Years	\$370.03	\$698.35	\$1,068.38	\$118.71	\$1,187.09	\$1,026.22
Retiree 65+ and 2 or more Children						
<i>Retiree enrolled with United Healthcare, Children enrolled with Cigna HIGH</i>						
20+ Years	\$115.12	\$737.14	\$852.26	\$1,033.17	\$1,885.43	\$823.36
15 - 19 Years	\$205.57	\$884.57	\$1,090.14	\$795.29	\$1,885.43	\$1,051.64
10 - 14 Years	\$287.80	\$1,179.42	\$1,467.22	\$418.21	\$1,885.43	\$1,415.12
5 - 9 Years	\$370.03	\$1,348.73	\$1,718.76	\$166.67	\$1,885.43	\$1,650.71
Retiree 65+, Spouse under 65, and Child(ren)						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with Cigna HIGH, Child(ren) enrolled with Cigna HIGH</i>						
20+ Years	\$115.12	\$737.14	\$852.26	\$1,033.17	\$1,885.43	\$823.36
15 - 19 Years	\$205.57	\$884.57	\$1,090.14	\$795.29	\$1,885.43	\$1,051.64
10 - 14 Years	\$287.80	\$1,179.42	\$1,467.22	\$418.21	\$1,885.43	\$1,415.12
5 - 9 Years	\$370.03	\$1,348.73	\$1,718.76	\$166.67	\$1,885.43	\$1,650.71
Retiree 65+ and Spouse 65+						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with United Healthcare</i>						
20+ Years	\$115.12	\$205.57	\$320.69	\$501.61	\$822.30	\$302.55
15 - 19 Years	\$205.57	\$246.69	\$452.26	\$370.04	\$822.30	\$426.67
10 - 14 Years	\$287.80	\$328.92	\$616.72	\$205.58	\$822.30	\$581.82
5 - 9 Years	\$370.03	\$370.03	\$740.06	\$82.24	\$822.30	\$698.18
Retiree 65+, Spouse 65+, and 1 Child						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with United Healthcare, 1 Child enrolled with Cigna HIGH</i>						
20+ Years	\$115.12	\$593.54	\$708.66	\$889.58	\$1,598.24	\$678.73
15 - 19 Years	\$205.57	\$712.25	\$917.82	\$680.42	\$1,598.24	\$878.09
10 - 14 Years	\$287.80	\$949.67	\$1,237.47	\$360.77	\$1,598.24	\$1,183.72
5 - 9 Years	\$370.03	\$1,068.38	\$1,438.41	\$159.83	\$1,598.24	\$1,375.31
Retiree 65+, Spouse 65+, and 2 or more Children						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with United Healthcare, Children enrolled with Cigna HIGH</i>						
20+ Years	\$115.12	\$981.46	\$1,096.58	\$1,200.00	\$2,296.58	\$1,017.30
15 - 19 Years	\$205.57	\$1,257.68	\$1,463.25	\$833.33	\$2,296.58	\$1,371.93
10 - 14 Years	\$287.80	\$1,508.78	\$1,796.58	\$500.00	\$2,296.58	\$1,725.42
5 - 9 Years	\$370.03	\$1,759.88	\$2,129.91	\$166.67	\$2,296.58	\$2,038.59
Retiree 65+, Spouse 65+, and 1 Medicare-Eligible Child						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with United Healthcare, Child enrolled with United Healthcare</i>						
20+ Years	\$115.12	\$411.15	\$526.27	\$707.18	\$1,233.45	\$496.49
15 - 19 Years	\$205.57	\$493.38	\$698.95	\$534.50	\$1,233.45	\$659.40
10 - 14 Years	\$287.80	\$657.84	\$945.64	\$287.81	\$1,233.45	\$892.13
5 - 9 Years	\$370.03	\$740.07	\$1,110.10	\$123.35	\$1,233.45	\$1,047.27

**If a covered retiree dies, the surviving spouse and/or dependent children may continue coverage by paying the full cost of the premium by personal check. If the surviving spouse also is a retiree of Arlington Public Schools, he or she may elect to continue coverage with the School Board's contribution computed based on the surviving spouse's service.

Monthly Retiree Dental Insurance Rates January 1 through December 31, 2018

All Retirees: [Delta Dental of Virginia](#)



	2018 Monthly Retiree Rate	2017 Monthly Retiree Rate
Individual		
20+ Years	\$54.84	\$53.92
15 - 19 Years	\$54.84	\$53.92
10 - 14 Years	\$54.84	\$53.92
5 - 9 Years	\$54.84	\$53.92
Individual + Spouse		
20+ Years	\$106.72	\$104.94
15 - 19 Years	\$106.72	\$104.94
10 - 14 Years	\$106.72	\$104.94
5 - 9 Years	\$106.72	\$104.94
Individual + Child(ren)		
20+ Years	\$110.12	\$108.28
15 - 19 Years	\$110.12	\$108.28
10 - 14 Years	\$110.12	\$108.28
5 - 9 Years	\$110.12	\$108.28
Family		
20+ Years	\$159.54	\$156.86
15 - 19 Years	\$159.54	\$156.86
10 - 14 Years	\$159.54	\$156.86
5 - 9 Years	\$159.54	\$156.86