

Monthly Retiree Health Insurance Rates January 1 through December 31, 2019



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

	2019 Monthly Retiree Rate	2019 Monthly Dependent Rate	2019 TOTAL Monthly Retiree and Dependent Rate	2019 Monthly APS Contribution	2019 Total Monthly Rate**	2018 TOTAL Monthly Retiree and Dependent Rate
Retiree under 65						
<i>Retiree enrolled with Kaiser HMO</i>						
20+ Years	\$120.40	n/a	\$120.40	\$426.89	\$547.29	\$116.53
15 - 19 Years	\$273.64	n/a	\$273.64	\$273.65	\$547.29	\$264.84
10 - 14 Years	\$383.10	n/a	\$383.10	\$164.19	\$547.29	\$370.78
5 - 9 Years	\$492.56	n/a	\$492.56	\$54.73	\$547.29	\$476.71
Retiree under 65, Spouse under 65						
<i>Retiree & Spouse enrolled with Kaiser HMO</i>						
20+ Years	\$398.29	n/a	\$398.29	\$723.64	\$1,121.93	\$385.47
15 - 19 Years	\$617.06	n/a	\$617.06	\$504.87	\$1,121.93	\$597.21
10 - 14 Years	\$841.45	n/a	\$841.45	\$280.48	\$1,121.93	\$814.37
5 - 9 Years	\$1,009.74	n/a	\$1,009.74	\$112.19	\$1,121.93	\$977.25
Retiree under 65, and Child(ren)						
<i>Retiree and Child(ren) enrolled with Kaiser HMO</i>						
20+ Years	\$359.43	n/a	\$359.43	\$653.05	\$1,012.48	\$347.86
15 - 19 Years	\$556.86	n/a	\$556.86	\$455.62	\$1,012.48	\$538.94
10 - 14 Years	\$759.36	n/a	\$759.36	\$253.12	\$1,012.48	\$734.92
5 - 9 Years	\$911.23	n/a	\$911.23	\$101.25	\$1,012.48	\$881.91
Retiree under 65, Spouse under 65, and Child(ren)						
<i>Retiree, Spouse, and Child(ren) enrolled with Kaiser HMO</i>						
20+ Years	\$651.82	n/a	\$651.82	\$990.04	\$1,641.86	\$630.84
15 - 19 Years	\$985.12	n/a	\$985.12	\$656.74	\$1,641.86	\$953.42
10 - 14 Years	\$1,313.49	n/a	\$1,313.49	\$328.37	\$1,641.86	\$1,271.22
5 - 9 Years	\$1,477.67	n/a	\$1,477.67	\$164.19	\$1,641.86	\$1,430.13
Retiree under 65, Spouse 65+						
<i>Retiree enrolled with Kaiser HMO, Spouse enrolled with Kaiser Medicare Plus</i>						
20+ Years	\$120.40	\$150.56	\$270.96	\$577.46	\$848.42	\$267.09
15 - 19 Years	\$273.65	\$180.68	\$454.33	\$394.09	\$848.42	\$445.53
10 - 14 Years	\$383.10	\$240.90	\$624.00	\$224.42	\$848.42	\$611.68
5 - 9 Years	\$492.56	\$271.02	\$763.58	\$84.84	\$848.42	\$747.73
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	\$359.43	\$150.56	\$509.99	\$803.62	\$1,313.61	\$498.42
15 - 19 Years	\$556.86	\$180.68	\$737.54	\$576.07	\$1,313.61	\$719.62
10 - 14 Years	\$759.36	\$240.90	\$1,000.26	\$313.35	\$1,313.61	\$975.82
5 - 9 Years	\$911.23	\$271.02	\$1,182.25	\$131.36	\$1,313.61	\$1,152.93

**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, 2019



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

	2019 Monthly Retiree Rate	2019 Monthly Dependent Rate	2019 TOTAL Monthly Retiree and Dependent Rate	2019 Monthly APS Contribution	2019 Total Monthly Rate**	2018 TOTAL Monthly Retiree and Dependent Rate
Retiree 65+						
<i>Retiree enrolled with Kaiser Medicare Plus/Advantage</i>						
20+ Years	\$66.25	n/a	\$66.25	\$234.88	\$301.13	\$66.25
15 - 19 Years	\$150.56	n/a	\$150.56	\$150.57	\$301.13	\$150.56
10 - 14 Years	\$210.79	n/a	\$210.79	\$90.34	\$301.13	\$210.79
5 - 9 Years	\$271.02	n/a	\$271.02	\$30.11	\$301.13	\$271.02
Retiree 65+ and Spouse under 65						
<i>Retiree enrolled with Kaiser Medicare Plus/Advantage, Spouse enrolled with Kaiser HMO</i>						
20+ Years	\$66.25	\$273.64	\$339.89	\$508.53	\$848.42	\$331.09
15 - 19 Years	\$150.56	\$328.37	\$478.93	\$369.49	\$848.42	\$468.37
10 - 14 Years	\$210.79	\$437.83	\$648.62	\$199.80	\$848.42	\$634.53
5 - 9 Years	\$271.02	\$492.56	\$763.58	\$84.84	\$848.42	\$747.73
Retiree 65+ and 1 Child						
<i>Retiree enrolled with Kaiser Medicare Plus/Advantage, Child enrolled with Kaiser HMO</i>						
20+ Years	\$66.25	\$273.64	\$339.89	\$508.53	\$848.42	\$331.09
15 - 19 Years	\$150.56	\$328.37	\$478.93	\$369.49	\$848.42	\$468.37
10 - 14 Years	\$210.79	\$437.83	\$648.62	\$199.80	\$848.42	\$634.53
5 - 9 Years	\$271.02	\$492.56	\$763.58	\$84.84	\$848.42	\$747.73
Retiree 65+ and 2 or more Children						
<i>Retiree enrolled with Kaiser Medicare Plus/Advantage, Children enrolled with Kaiser HMO</i>						
20+ Years	\$66.25	\$506.24	\$572.49	\$741.12	\$1,313.61	\$556.20
15 - 19 Years	\$150.56	\$607.49	\$758.05	\$555.56	\$1,313.61	\$738.50
10 - 14 Years	\$210.79	\$809.98	\$1,020.77	\$292.84	\$1,313.61	\$994.71
5 - 9 Years	\$271.02	\$911.23	\$1,182.25	\$131.36	\$1,313.61	\$1,152.93
Retiree 65+, Spouse under 65, and Child(ren)						
<i>Retiree enrolled w/ Kaiser Medicare Plus/Advantage, Spouse enrolled w/ Kaiser HMO, Child(ren) enrolled w/ Kaiser HMO</i>						
20+ Years	\$66.25	\$506.24	\$572.49	\$741.12	\$1,313.61	\$556.20
15 - 19 Years	\$150.56	\$607.49	\$758.05	\$555.56	\$1,313.61	\$738.50
10 - 14 Years	\$210.79	\$809.98	\$1,020.77	\$292.84	\$1,313.61	\$994.71
5 - 9 Years	\$271.02	\$911.23	\$1,182.25	\$131.36	\$1,313.61	\$1,152.93
Retiree 65+ and Spouse 65+						
<i>Retiree enrolled with Kaiser Medicare Plus/Advantage, Spouse enrolled with Kaiser Medicare Plus/Advantage</i>						
20+ Years	\$66.25	\$150.56	\$216.81	\$385.45	\$602.26	\$216.81
15 - 19 Years	\$150.56	\$180.68	\$331.24	\$271.02	\$602.26	\$331.24
10 - 14 Years	\$210.79	\$240.90	\$451.69	\$150.57	\$602.26	\$451.69
5 - 9 Years	\$271.02	\$271.02	\$542.04	\$60.22	\$602.26	\$542.04
Retiree 65+, Spouse 65+, and 1 Child						
<i>Retiree enrolled w/ Kaiser Medicare Plus/Advantage, Spouse enrolled w/ Kaiser Medicare Plus/Advantage, 1 Child enrolled w/ Kaiser HMO</i>						
20+ Years	\$66.25	\$424.21	\$490.46	\$659.09	\$1,149.55	\$481.65
15 - 19 Years	\$150.56	\$509.05	\$659.61	\$489.94	\$1,149.55	\$649.05
10 - 14 Years	\$210.79	\$678.74	\$889.53	\$260.02	\$1,149.55	\$875.44
5 - 9 Years	\$271.02	\$763.58	\$1,034.60	\$114.95	\$1,149.55	\$1,018.75
Retiree 65+, Spouse 65+, and 2 or more Children						
<i>Retiree enrolled w/ Kaiser Medicare Plus/Advantage, Spouse enrolled w/ Kaiser Medicare Plus/Advantage, Children enrolled w/ Kaiser HMO</i>						
20+ Years	\$66.25	\$656.80	\$723.05	\$891.69	\$1,614.74	\$706.76
15 - 19 Years	\$150.56	\$788.17	\$938.73	\$676.01	\$1,614.74	\$919.18
10 - 14 Years	\$210.79	\$1,050.89	\$1,261.68	\$353.06	\$1,614.74	\$1,235.61
5 - 9 Years	\$271.02	\$1,182.25	\$1,453.27	\$161.47	\$1,614.74	\$1,423.95
Retiree 65+, Spouse 65+, and 1 Medicare-Eligible Child						
<i>Retiree enrolled w/ Kaiser Medicare Plus/Advantage, Spouse enrolled w/ Kaiser Medicare Plus/Advantage, and Child enrolled w/ Kaiser Medicare Plus/Advantage</i>						
20+ Years	\$66.25	\$301.13	\$367.38	\$536.01	\$903.39	\$367.38
15 - 19 Years	\$150.56	\$361.36	\$511.92	\$391.47	\$903.39	\$511.92
10 - 14 Years	\$210.79	\$481.81	\$692.60	\$210.79	\$903.39	\$692.60
5 - 9 Years	\$271.02	\$542.03	\$813.05	\$90.34	\$903.39	\$813.05

**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, 2019



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

	2019 Monthly Retiree Rate	2019 Monthly Dependent Rate	2019 TOTAL Monthly Retiree and Dependent Rate	2019 Monthly APS Contribution	2019 Total Monthly Rate**	2018 TOTAL Monthly Retiree and Dependent Rate
Retiree under 65						
<i>Retiree enrolled with Cigna LOW</i>						
20+ Years	\$140.74	n/a	\$140.74	\$400.57	\$541.31	\$137.68
15 - 19 Years	\$270.65	n/a	\$270.65	\$270.66	\$541.31	\$264.76
10 - 14 Years	\$378.92	n/a	\$378.92	\$162.39	\$541.31	\$370.66
5 - 9 Years	\$487.18	n/a	\$487.18	\$54.13	\$541.31	\$476.57
Retiree under 65, Spouse under 65						
<i>Retiree & Spouse enrolled with Cigna LOW</i>						
20+ Years	\$443.34	n/a	\$443.34	\$693.42	\$1,136.76	\$433.67
15 - 19 Years	\$625.22	n/a	\$625.22	\$511.54	\$1,136.76	\$611.59
10 - 14 Years	\$852.57	n/a	\$852.57	\$284.19	\$1,136.76	\$833.99
5 - 9 Years	\$1,023.08	n/a	\$1,023.08	\$113.68	\$1,136.76	\$1,000.78
Retiree under 65, and Child(ren)						
<i>Retiree and Child(ren) enrolled with Cigna LOW</i>						
20+ Years	\$401.11	n/a	\$401.11	\$627.38	\$1,028.49	\$392.37
15 - 19 Years	\$565.67	n/a	\$565.67	\$462.82	\$1,028.49	\$553.34
10 - 14 Years	\$771.37	n/a	\$771.37	\$257.12	\$1,028.49	\$754.56
5 - 9 Years	\$925.64	n/a	\$925.64	\$102.85	\$1,028.49	\$905.47
Retiree under 65, Spouse under 65, and Child(ren)						
<i>Retiree, Spouse, and Child(ren) enrolled with Cigna LOW</i>						
20+ Years	\$682.05	n/a	\$682.05	\$941.88	\$1,623.93	\$667.19
15 - 19 Years	\$974.36	n/a	\$974.36	\$649.57	\$1,623.93	\$953.13
10 - 14 Years	\$1,299.14	n/a	\$1,299.14	\$324.79	\$1,623.93	\$1,270.84
5 - 9 Years	\$1,461.54	n/a	\$1,461.54	\$162.39	\$1,623.93	\$1,429.69
Retiree under 65, Spouse 65+						
<i>Retiree enrolled with Cigna LOW, Spouse enrolled with United Healthcare</i>						
20+ Years	\$140.74	\$205.57	\$346.31	\$606.15	\$952.46	\$343.25
15 - 19 Years	\$270.65	\$246.69	\$517.34	\$435.12	\$952.46	\$511.45
10 - 14 Years	\$378.92	\$328.92	\$707.84	\$244.62	\$952.46	\$699.58
5 - 9 Years	\$487.18	\$370.03	\$857.21	\$95.25	\$952.46	\$846.60
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	\$401.11	\$205.57	\$606.68	\$832.96	\$1,439.64	\$597.94
15 - 19 Years	\$565.67	\$246.69	\$812.36	\$627.28	\$1,439.64	\$800.03
10 - 14 Years	\$771.37	\$328.92	\$1,100.29	\$339.35	\$1,439.64	\$1,083.48
5 - 9 Years	\$925.64	\$370.03	\$1,295.67	\$143.97	\$1,439.64	\$1,275.50

**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, 2019



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

	2019 Monthly Retiree Rate	2019 Monthly Dependent Rate	2019 TOTAL Monthly Retiree and Dependent Rate	2019 Monthly APS Contribution	2019 Total Monthly Rate**	2018 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	\$115.12
15 - 19 Years	\$205.57	n/a	\$205.57	\$205.58	\$411.15	\$205.57
10 - 14 Years	\$287.80	n/a	\$287.80	\$123.35	\$411.15	\$287.80
5 - 9 Years	\$370.03	n/a	\$370.03	\$41.12	\$411.15	\$370.03
Retiree 65+ and Spouse under 65						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with Cigna LOW</i>						
20+ Years	\$115.12	\$270.65	\$385.77	\$566.69	\$952.46	\$379.88
15 - 19 Years	\$205.57	\$324.79	\$530.36	\$422.10	\$952.46	\$523.28
10 - 14 Years	\$287.80	\$433.05	\$720.85	\$231.61	\$952.46	\$711.42
5 - 9 Years	\$370.03	\$487.18	\$857.21	\$95.25	\$952.46	\$846.60
Retiree 65+ and 1 Child						
<i>Retiree enrolled with United Healthcare, Child enrolled with Cigna LOW</i>						
20+ Years	\$115.12	\$270.65	\$385.77	\$566.69	\$952.46	\$379.88
15 - 19 Years	\$205.57	\$324.79	\$530.36	\$422.10	\$952.46	\$523.28
10 - 14 Years	\$287.80	\$433.05	\$720.85	\$231.61	\$952.46	\$711.42
5 - 9 Years	\$370.03	\$487.18	\$857.21	\$95.25	\$952.46	\$846.60
Retiree 65+ and 2 or more Children						
<i>Retiree enrolled with United Healthcare, Children enrolled with Cigna LOW</i>						
20+ Years	\$115.12	\$514.25	\$629.37	\$810.27	\$1,439.64	\$618.17
15 - 19 Years	\$205.57	\$617.09	\$822.66	\$616.98	\$1,439.64	\$809.22
10 - 14 Years	\$287.80	\$822.79	\$1,110.59	\$329.05	\$1,439.64	\$1,092.66
5 - 9 Years	\$370.03	\$925.64	\$1,295.67	\$143.97	\$1,439.64	\$1,275.50
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	\$514.25	\$629.37	\$810.27	\$1,439.64	\$618.17
15 - 19 Years	\$205.57	\$617.09	\$822.66	\$616.98	\$1,439.64	\$809.22
10 - 14 Years	\$287.80	\$822.79	\$1,110.59	\$329.05	\$1,439.64	\$1,092.66
5 - 9 Years	\$370.03	\$925.64	\$1,295.67	\$143.97	\$1,439.64	\$1,275.50
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	\$320.69
15 - 19 Years	\$205.57	\$246.69	\$452.26	\$370.04	\$822.30	\$452.26
10 - 14 Years	\$287.80	\$328.92	\$616.72	\$205.58	\$822.30	\$616.72
5 - 9 Years	\$370.03	\$370.03	\$740.06	\$82.24	\$822.30	\$740.06
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	\$476.23	\$591.35	\$772.26	\$1,363.61	\$585.45
15 - 19 Years	\$205.57	\$571.48	\$777.05	\$586.56	\$1,363.61	\$769.97
10 - 14 Years	\$287.80	\$761.97	\$1,049.77	\$313.84	\$1,363.61	\$1,040.34
5 - 9 Years	\$370.03	\$857.21	\$1,227.24	\$136.37	\$1,363.61	\$1,216.63
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	\$719.82	\$834.94	\$1,015.85	\$1,850.79	\$823.73
15 - 19 Years	\$205.57	\$863.78	\$1,069.35	\$781.44	\$1,850.79	\$1,055.91
10 - 14 Years	\$287.80	\$1,151.71	\$1,439.51	\$411.28	\$1,850.79	\$1,421.58
5 - 9 Years	\$370.03	\$1,314.09	\$1,684.12	\$166.67	\$1,850.79	\$1,661.71
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	\$526.27
15 - 19 Years	\$205.57	\$493.38	\$698.95	\$534.50	\$1,233.45	\$698.95
10 - 14 Years	\$287.80	\$657.84	\$945.64	\$287.81	\$1,233.45	\$945.64
5 - 9 Years	\$370.03	\$740.07	\$1,110.10	\$123.35	\$1,233.45	\$1,110.10

**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, 2019



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

	2019 Monthly Retiree Rate	2019 Monthly Dependent Rate	2019 TOTAL Monthly Retiree and Dependent Rate	2019 Monthly APS Contribution	2019 Total Monthly Rate**	2018 TOTAL Monthly Retiree and Dependent Rate
Retiree under 65						
<i>Retiree enrolled with Cigna HIGH</i>						
20+ Years	\$253.83	n/a	\$253.83	\$539.39	\$793.22	\$248.30
15 - 19 Years	\$396.61	n/a	\$396.61	\$396.61	\$793.22	\$387.97
10 - 14 Years	\$555.25	n/a	\$555.25	\$237.97	\$793.22	\$543.16
5 - 9 Years	\$713.90	n/a	\$713.90	\$79.32	\$793.22	\$698.35
Retiree under 65, Spouse under 65						
<i>Retiree & Spouse enrolled with Cigna HIGH</i>						
20+ Years	\$682.95	n/a	\$682.95	\$982.79	\$1,665.74	\$668.07
15 - 19 Years	\$916.16	n/a	\$916.16	\$749.58	\$1,665.74	\$896.20
10 - 14 Years	\$1,249.30	n/a	\$1,249.30	\$416.44	\$1,665.74	\$1,222.09
5 - 9 Years	\$1,499.17	n/a	\$1,499.17	\$166.57	\$1,665.74	\$1,466.50
Retiree under 65, and Child(ren)						
<i>Retiree and Child(ren) enrolled with Cigna HIGH</i>						
20+ Years	\$617.92	n/a	\$617.92	\$889.20	\$1,507.12	\$604.45
15 - 19 Years	\$828.92	n/a	\$828.92	\$678.20	\$1,507.12	\$810.85
10 - 14 Years	\$1,130.34	n/a	\$1,130.34	\$376.78	\$1,507.12	\$1,105.71
5 - 9 Years	\$1,356.41	n/a	\$1,356.41	\$150.71	\$1,507.12	\$1,326.85
Retiree under 65, Spouse under 65, and Child(ren)						
<i>Retiree, Spouse, and Child(ren) enrolled with Cigna HIGH</i>						
20+ Years	\$1,179.65	n/a	\$1,179.65	\$1,200.00	\$2,379.65	\$1,127.80
15 - 19 Years	\$1,546.32	n/a	\$1,546.32	\$833.33	\$2,379.65	\$1,494.47
10 - 14 Years	\$1,903.72	n/a	\$1,903.72	\$475.93	\$2,379.65	\$1,862.24
5 - 9 Years	\$2,212.98	n/a	\$2,212.98	\$166.67	\$2,379.65	\$2,161.13
Retiree under 65, Spouse 65+						
<i>Retiree enrolled with Cigna HIGH, Spouse enrolled with United Healthcare</i>						
20+ Years	\$253.83	\$205.57	\$459.40	\$744.97	\$1,204.37	\$453.87
15 - 19 Years	\$396.61	\$246.69	\$643.30	\$561.07	\$1,204.37	\$634.66
10 - 14 Years	\$555.25	\$328.92	\$884.17	\$320.20	\$1,204.37	\$872.08
5 - 9 Years	\$713.90	\$370.03	\$1,083.93	\$120.44	\$1,204.37	\$1,068.38
Retiree under 65, and Child(ren), Spouse 65+						
<i>Retiree and Child(ren) enrolled with Cigna HIGH, Spouse enrolled with United Healthcare</i>						
20+ Years	\$617.92	\$205.57	\$823.49	\$1,094.78	\$1,918.27	\$810.02
15 - 19 Years	\$828.92	\$256.02	\$1,084.94	\$833.33	\$1,918.27	\$1,057.54
10 - 14 Years	\$1,130.34	\$328.92	\$1,459.26	\$459.01	\$1,918.27	\$1,434.63
5 - 9 Years	\$1,356.41	\$395.19	\$1,751.60	\$166.67	\$1,918.27	\$1,718.76

**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, 2019



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

	2019 Monthly Retiree Rate	2019 Monthly Dependent Rate	2019 TOTAL Monthly Retiree and Dependent Rate	2019 Monthly APS Contribution	2019 Total Monthly Rate**	2018 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	\$115.12
15 - 19 Years	\$205.57	n/a	\$205.57	\$205.58	\$411.15	\$205.57
10 - 14 Years	\$287.80	n/a	\$287.80	\$123.35	\$411.15	\$287.80
5 - 9 Years	\$370.03	n/a	\$370.03	\$41.12	\$411.15	\$370.03
Retiree 65+ and Spouse under 65						
<i>Retiree enrolled with United Healthcare, Spouse enrolled with Cigna HIGH</i>						
20+ Years	\$115.12	\$396.61	\$511.73	\$692.64	\$1,204.37	\$503.09
15 - 19 Years	\$205.57	\$475.93	\$681.50	\$522.87	\$1,204.37	\$671.13
10 - 14 Years	\$287.80	\$634.58	\$922.38	\$281.99	\$1,204.37	\$908.55
5 - 9 Years	\$370.03	\$713.90	\$1,083.93	\$120.44	\$1,204.37	\$1,068.38
Retiree 65+ and 1 Child						
<i>Retiree enrolled with United Healthcare, Child enrolled with Cigna HIGH</i>						
20+ Years	\$115.12	\$396.61	\$511.73	\$692.64	\$1,204.37	\$503.09
15 - 19 Years	\$205.57	\$475.93	\$681.50	\$522.87	\$1,204.37	\$671.13
10 - 14 Years	\$287.80	\$634.58	\$922.38	\$281.99	\$1,204.37	\$908.55
5 - 9 Years	\$370.03	\$713.90	\$1,083.93	\$120.44	\$1,204.37	\$1,068.38
Retiree 65+ and 2 or more Children						
<i>Retiree enrolled with United Healthcare, Children enrolled with Cigna HIGH</i>						
20+ Years	\$115.12	\$753.56	\$868.68	\$1,049.59	\$1,918.27	\$852.26
15 - 19 Years	\$205.57	\$904.27	\$1,109.84	\$808.43	\$1,918.27	\$1,090.14
10 - 14 Years	\$287.80	\$1,205.70	\$1,493.50	\$424.77	\$1,918.27	\$1,467.22
5 - 9 Years	\$370.03	\$1,381.57	\$1,751.60	\$166.67	\$1,918.27	\$1,718.76
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	\$753.56	\$868.68	\$1,049.59	\$1,918.27	\$852.26
15 - 19 Years	\$205.57	\$904.27	\$1,109.84	\$808.43	\$1,918.27	\$1,090.14
10 - 14 Years	\$287.80	\$1,205.70	\$1,493.50	\$424.77	\$1,918.27	\$1,467.22
5 - 9 Years	\$370.03	\$1,381.57	\$1,751.60	\$166.67	\$1,918.27	\$1,718.76
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	\$320.69
15 - 19 Years	\$205.57	\$246.69	\$452.26	\$370.04	\$822.30	\$452.26
10 - 14 Years	\$287.80	\$328.92	\$616.72	\$205.58	\$822.30	\$616.72
5 - 9 Years	\$370.03	\$370.03	\$740.06	\$82.24	\$822.30	\$740.06
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	\$602.18	\$717.30	\$898.22	\$1,615.52	\$708.66
15 - 19 Years	\$205.57	\$722.62	\$928.19	\$687.33	\$1,615.52	\$917.82
10 - 14 Years	\$287.80	\$963.50	\$1,251.30	\$364.22	\$1,615.52	\$1,237.47
5 - 9 Years	\$370.03	\$1,083.93	\$1,453.96	\$161.56	\$1,615.52	\$1,438.41
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	\$1,014.30	\$1,129.42	\$1,200.00	\$2,329.42	\$1,096.58
15 - 19 Years	\$205.57	\$1,290.52	\$1,496.09	\$833.33	\$2,329.42	\$1,463.25
10 - 14 Years	\$287.80	\$1,541.62	\$1,829.42	\$500.00	\$2,329.42	\$1,796.58
5 - 9 Years	\$370.03	\$1,792.72	\$2,162.75	\$166.67	\$2,329.42	\$2,129.91
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	\$526.27
15 - 19 Years	\$205.57	\$493.38	\$698.95	\$534.50	\$1,233.45	\$698.95
10 - 14 Years	\$287.80	\$657.84	\$945.64	\$287.81	\$1,233.45	\$945.64
5 - 9 Years	\$370.03	\$740.07	\$1,110.10	\$123.35	\$1,233.45	\$1,110.10

**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, 2019

All Retirees: **Delta Dental of Virginia**



	2019 Monthly Retiree Rate	2018 Monthly Retiree Rate
Individual		
20+ Years	\$54.84	\$54.84
15 - 19 Years	\$54.84	\$54.84
10 - 14 Years	\$54.84	\$54.84
5 - 9 Years	\$54.84	\$54.84
Individual + Spouse		
20+ Years	\$106.72	\$106.72
15 - 19 Years	\$106.72	\$106.72
10 - 14 Years	\$106.72	\$106.72
5 - 9 Years	\$106.72	\$106.72
Individual + Child(ren)		
20+ Years	\$110.12	\$110.12
15 - 19 Years	\$110.12	\$110.12
10 - 14 Years	\$110.12	\$110.12
5 - 9 Years	\$110.12	\$110.12
Family		
20+ Years	\$159.54	\$159.54
15 - 19 Years	\$159.54	\$159.54
10 - 14 Years	\$159.54	\$159.54
5 - 9 Years	\$159.54	\$159.54