

2025 Retiree Health Plan Rate Table

RETIREES NOT ENROLLED IN MEDICARE

RETIREE ENROLLMENT STATUS	HEALTH MAINTENANCE PLANS (HMO)			PPO PLANS	
	Cigna Choice HMO Plan Monthly Rate	Cigna Select HMO Plan Monthly Rate	Kaiser Health Plan Monthly Rate	Sharewell Retiree Plan Monthly Rate	Wellwise Retiree Plan Monthly Rate
RETIREE ONLY					
Retiree Only	\$1,221.55	\$981.13	\$954.83	\$855.19	\$1,300.67
Spouse Only	\$1,221.55	\$981.13	\$954.83	\$855.19	\$1,300.67
Child(ren) Only*	\$1,221.55	\$981.13	\$954.83	\$855.19	\$1,300.67
RETIREE WITH 1 DEPENDENT*					
Retree + Spouse	\$2,414.10	\$1,939.36	\$1,909.66	\$1,496.53	\$2,406.25
Retiree + Child(ren)*	\$2,414.10	\$1,939.36	\$1,909.66	\$1,496.53	\$2,406.25
Spouse + Child(ren)*	\$2,414.10	\$1,939.36	\$1,909.66	\$1,496.53	\$2,406.25
RETIREE WITH 2+ DEPENDENTS					
Retree + Spouse+ Child(ren)*	\$3,358.80	\$2,698.68	\$2,702.17	\$1,966.93	\$3,251.68
* Children are considered 1 dependent					

NOTE: For information about the Grant and/or HRA, please review the Intent to Retire Summary and Attaining Medicare Summary. https://hrs.ocgov.com/retiree.benefits



2025 Retiree Health Plan Rate Table

RETIREE ENROLLMENT STATUS	MEDICARE ADVANTAGE PLANS			PPO PLANS							
	PPO Plan Humana PPO Plan Monthly Rate	HEALTH MAINTENANCE PLANS (HMO)		FFO FLAINS							
		Kaiser Sr Advantage Plan Monthly Rate	Scan HMO Plan Monthly Rate	Sharewell Retiree Plan Monthly Rate	Wellwise Retiree Plan Monthly Rate						
						RETIREE ONLY					
						Retiree Only - Part B Only	\$746.71	\$468.81	NA	\$674.54	\$844.16
Retiree Only - Part A & B	\$218.85	\$215.05	\$275.00	\$408.41	\$604.98						
RETIREE W/1 DEPENDENT											
Two W/ Medicare Part B Only	\$1,493.42	\$937.62	NA	\$1,349.08	\$1,688.31						
Two W/ Medicare Part A & B	\$437.70	\$430.10	\$550.00	\$816.83	\$1,209.96						
RETIREE W/2 DEPENDENT											
Three W/ Medicare Part B Only	\$2,240.13	\$1,406.43	NA	\$2,023.61	\$2,532.47						
Three W/ Medicare Part A & B	\$656.55	\$645.15	\$825.00	\$1,225.24	\$1,814.94						

NOTE: For information about the Grant and/or HRA, please review the Intent to Retire Summary and Attaining Medicare Summary. https://hrs.ocgov.com/retiree.benefits



2025 COBRA Retiree Health Plan Monthly Direct Bill Rate Table

RETIREES NOT ENROLLED IN MEDICARE

RETIREE Enrollment Status	HMO Plans			PPO PLANS	
	Cigna Choice Retiree HMO Plan Monthly Rate	Cigna Select Retiree HMO Plan Monthly Rate	Kaiser Retiree HMO Plan Monthly Rate	Sharewell Retiree PPO Plan Monthly Rate	Wellwise Retiree PPO Plan Monthly Rate
RETIREE ONLY					
Retiree Only	\$1,245.98	\$1,000.75	\$973.93	\$872.29	\$1,326.68
Spouse Only	\$1,245.98	\$1,000.75	\$973.93	\$872.29	\$1,326.68
Child(ren) Only*	\$1,245.98	\$1,000.75	\$973.93	\$872.29	\$1,326.68
RETIREE WITH 1 DEPENDENT*					
Retree + Spouse	\$2,462.38	\$1,978.14	\$1,947.85	\$1,526.46	\$2,454.38
Retiree + Child(ren)*	\$2,462.38	\$1,978.14	\$1,947.85	\$1,526.46	\$2,454.38
Spouse + Child(ren)*	\$2,462.38	\$1,978.14	\$1,947.85	\$1,526.46	\$2,454.38
RETIREE WITH 2 + DEPENDENTS					
Retree + Spouse+ Child(ren)*	\$3,425.98	\$2,752.65	\$2,756.21	\$2,006.27	\$3,316.71
* Children are considered 1 dependent					



2025 COBRA Retiree Health Plan Monthly Direct Bill Rate Table

RETIREES ENROLLED IN MEDICARE

RETIREE ENROLLMENT STATUS	MEDI	CARE ADVANTAGE P			
	PPO Plan	HMO Plans		PPO Plans	
	Humana Retiree Medicare PPO Plan Monthly Rate	Kaiser Sr. Advantage HMO Plan Monthly Rate	SCAN Retiree Medicare HMO Plan Monthly Rate	Sharewell Retiree PPO Plan Monthly Rate	Wellwise Retiree Medicare PPO Plan Monthly Rate
RETIREE ONLY					
Retiree Only - Part B Only	\$761.64	\$478.19	NA	\$688.03	\$861.04
Retiree Only - Part A & B	\$223.23	\$219.35	\$280.50	\$416.58	\$617.08
RETIREE W/1 DEPENDENT					
Two W/ Medicare Part B Only	\$1,523.29	\$956.37	NA	\$1,376.06	\$1,722.08
Two W/ Medicare Part A & B	\$446.45	\$438.70	\$561.00	\$833.16	\$1,234.16
RETIREE W/2 DEPENDENT					
Three W/ Medicare Part B Only	\$2,284.93	\$1,434.56	NA	\$2,064.08	\$2,583.12
Three W/ Medicare Part A & B	\$669.68	\$658.05	\$841.50	\$1,249.74	\$1,851.24