Years of Service	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25-
NON-MEDICARE MEDICAL	·			-												= -			= -		
Premier PPO (BCBS or Presbyterian)																					
Retiree Rate	\$869.78	\$842.44	\$815.10	\$787.76	\$760.42	\$733.07	\$705.73	\$678.39	\$651.05	\$623.71	\$596.37	\$569.03	\$541.69	\$514.35	\$487.01	\$459.66	\$432.32	\$404.98	\$377.64	\$350.30	\$322.96
Spouse Rate	\$941.38	\$924.96	\$908.54	\$892.12	\$875.70	\$859.28	\$842.86	\$826.44	\$810.02	\$793.60	\$777.19	\$760.77	\$744.35	\$727.93	\$711.51	\$695.09	\$678.67	\$662.25	\$645.83	\$629.41	\$612.99
Child Rate	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49	\$313.49
Value HMO (BCBS or Presbyterian)	,	,					, , , ,		, , , , ,	,	,			, , , , ,		,		,	,		
Retiree Rate	\$679.42	\$658.07	\$636.71	\$615.35	\$593.99	\$572.64	\$551.28	\$529.92	\$508.57	\$487.21	\$465.85	\$444.49	\$423.14	\$401.78	\$380.42	\$359.07	\$337.71	\$316.35	\$294.99	\$273.64	\$252.28
Spouse Rate	\$735.30	\$722.48	\$709.65	\$696.83	\$684.00	\$671.18	\$658.35	\$645.53	\$632.70	\$619.88	\$607.05	\$594.23	\$581.40	\$568.58	\$555.75	\$542.93	\$530.10	\$517.28	\$504.45	\$491.63	\$478.80
Child Rate	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46	\$244.46
MEDICARE MEDICAL																					
BCBS Medicare Supplemental Plan																					
Retiree Rate	\$470.13	\$458.67	\$447.20	\$435.73	\$424.27	\$412.80	\$401.33	\$389.87	\$378.40	\$366.93	\$355.47	\$344.00	\$332.53	\$321.07	\$309.60	\$298.13	\$286.67	\$275.20	\$263.73	\$252.27	\$240.80
Spouse Rate	\$475.87	\$470.13	\$464.40	\$458.67	\$452.93	\$447.20	\$441.47	\$435.73	\$430.00	\$424.27	\$418.53	\$412.80	\$407.07	\$401.33	\$395.60	\$389.87	\$384.13	\$378.40	\$372.67	\$366.93	\$361.20
Child Rate	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60	\$481.60
BCBS Medicare Advantage I	T	¥ 10 1100	* 10 1101	***************************************	*	* 10 1100	7 10 1100	***************************************	7.0	7.0	7.0	*	* 10 1100	***************************************	************	7101100	***************************************	************	***************************************	*	T
Retiree Rate	\$43.93	\$42.86	\$41.79	\$40.71	\$39.64	\$38.57	\$37.50	\$36.43	\$35.36	\$34.29	\$33.21	\$32.14	\$31.07	\$30.00	\$28.93	\$27.86	\$26.79	\$25.71	\$24.64	\$23.57	\$22.50
Spouse Rate	\$44.46	\$43.93	\$43.39	\$42.86	\$42.32	\$41.79	\$41.25	\$40.71	\$40.18	\$39.64	\$39.11	\$38.57	\$38.04	\$37.50	\$36.96	\$36.43	\$35.89	\$35.36	\$34.82	\$34.29	\$33.75
Child Rate	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00
BCBS Medicare Advantage II		,	,	,	,	,	,	,	,	,	,	,	,	,	,		,	,	,	,	
Retiree Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Spouse Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Child Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Humana Medicare Advantage I																					
Retiree Rate	\$56.83	\$55.45	\$54.06	\$52.68	\$51.29	\$49.90	\$48.52	\$47.13	\$45.74	\$44.36	\$42.97	\$41.59	\$40.20	\$38.81	\$37.43	\$36.04	\$34.65	\$33.27	\$31.88	\$30.50	\$29.11
Spouse Rate	\$57.53	\$56.83	\$56.14	\$55.45	\$54.75	\$54.06	\$53.37	\$52.67	\$51.98	\$51.29	\$50.59	\$49.90	\$49.21	\$48.51	\$47.82	\$47.13	\$46.43	\$45.74	\$45.05	\$44.35	\$43.66
Child Rate	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22	\$58.22
Humana Medicare Advantage II																					
Retiree Rate	\$11.27	\$10.99	\$10.72	\$10.44	\$10.17	\$9.89	\$9.62	\$9.34	\$9.07	\$8.79	\$8.52	\$8.24	\$7.97	\$7.69	\$7.42	\$7.14	\$6.87	\$6.59	\$6.32	\$6.04	\$5.77
Spouse Rate	\$11.40	\$11.26	\$11.13	\$10.99	\$10.85	\$10.71	\$10.58	\$10.44	\$10.30	\$10.16	\$10.03	\$9.89	\$9.75	\$9.61	\$9.48	\$9.34	\$9.20	\$9.06	\$8.93	\$8.79	\$8.65
Child Rate	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54	\$11.54
Presbyterian Medicare Advantage I																					
Retiree Rate	\$121.34	\$118.38	\$115.42	\$112.46	\$109.50	\$106.54	\$103.58	\$100.62	\$97.66	\$94.70	\$91.75	\$88.79	\$85.83	\$82.87	\$79.91	\$76.95	\$73.99	\$71.03	\$68.07	\$65.11	\$62.15
Spouse Rate	\$122.82	\$121.34	\$119.86	\$118.38	\$116.90	\$115.42	\$113.94	\$112.46	\$110.98	\$109.50	\$108.02	\$106.54	\$105.06	\$103.58	\$102.10	\$100.62	\$99.14	\$97.66	\$96.18	\$94.70	\$93.22
Child Rate	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30	\$124.30
Presbyterian Medicare Advantage II																					
Retiree Rate	\$94.50	\$92.19	\$89.89	\$87.58	\$85.28	\$82.97	\$80.67	\$78.36	\$76.06	\$73.75	\$71.45	\$69.14	\$66.84	\$64.53	\$62.23	\$59.92	\$57.62	\$55.31	\$53.01	\$50.70	\$48.40
Spouse Rate	\$95.65	\$94.50	\$93.34	\$92.19	\$91.04	\$89.89	\$88.73	\$87.58	\$86.43	\$85.28	\$84.12	\$82.97	\$81.82	\$80.67	\$79.51	\$78.36	\$77.21	\$76.06	\$74.90	\$73.75	\$72.60
Child Rate	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80	\$96.80
UnitedHealthcare Medicare Advantage I																					
Retiree Rate		\$79.05	\$77.07	\$75.10	\$73.12	\$71.14	\$69.17	\$67.19	\$65.21	\$63.24	\$61.26	\$59.29	\$57.31	\$55.33	\$53.36	\$51.38	\$49.40	\$47.43	\$45.45	\$43.48	\$41.50
Spouse Rate	\$82.01	\$81.02	\$80.04	\$79.05	\$78.06	\$77.07	\$76.08	\$75.10	\$74.11	\$73.12	\$72.13	\$71.14	\$70.15	\$69.17	\$68.18	\$67.19	\$66.20	\$65.21	\$64.23	\$63.24	\$62.25
Child Rate	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00	\$83.00
UnitedHealthcare Medicare Advantage II																					
Retiree Rate		\$31.43	\$30.64	\$29.86	\$29.07	\$28.29	\$27.50	\$26.71	\$25.93	\$25.14	\$24.36	\$23.57	\$22.79	\$22.00	\$21.21	\$20.43	\$19.64	\$18.86	\$18.07	\$17.29	\$16.50
Spouse Rate		\$32.21	\$31.82	\$31.43	\$31.04	\$30.64	\$30.25	\$29.86	\$29.46	\$29.07	\$28.68	\$28.29	\$27.89	\$27.50	\$27.11	\$26.71	\$26.32	\$25.93	\$25.54	\$25.14	\$24.75
Child Rate	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00	\$33.00

				Medical Plan	Rate Calcul	ation Instruction	ons					
1. Select a medical		\$ Ret	ree									
2. If you are enrolling your spouse or domestic partner, select a medical plan for him/her; enter the rate from the Spouse Rate row that corresponds with your years of service (or, if your spouse/domestic partner is also an NMRHCA-eligible retiree, use the Retiree Rate that corresponds with your spouse's/domestic partner's years of service).									+ \$ Spouse/Domestic Partner			
3. If you are also er	- \$ Child(ren)											
4. TOTAL #1, #2, and #3.										\$ Total		
				Volunt	ary Coverag	e Premiums						
			DENTAL PLA	AN Monthly Premi	um*: Effective Ja	nuary 1, 2023 to Dec	ember 31, 2023					
	Ī	FAMILY										
Delta Dental Basic				\$18.87			O-PARTY 84 for both		\$ 53.76 for all			
Delta Dental Compre	hensive			\$38.49			13 for both		\$109.66 for all			
		-	VISION	PLAN Monthly Pr	emium*: Effect	ive July 1, 2020 to Jur	ne 30, 2024	=				
Davis Vision				\$ 4.62		\$ 8.	71 for both		\$12.83	for all		
			DEPENDEN [*]	T CHILD LIFE Mont	hly Premium*: E	ffective July 1, 2019 t	o June 30, 2023					
The Standard Insuran	ce		\$2,5	500 - \$4.13 <i>for all</i>		\$5,000	- \$7.75 <i>for all</i>		\$10,000 - \$ 1	5.00 for all		
		R	ETIREE/SPOUSE S	UPPLEMENTAL LIF	E Monthly Premi	um*: Effective July 1	, 2019 to June 30,	2023				
The Standard	\$2,000	\$4,000	\$6,000	\$8,000	\$10,000	\$15,000**	\$20,000**	\$40,000**	\$46,000**	\$60,000**		
Age 35-39	\$ 0.69	\$ 0.88	\$ 1.06	\$ 1.25	\$ 1.44	\$ 1.91	\$ 2.38	\$ 4.26	\$ 4.82	\$ 6.14		
Age 40-44	\$ 0.80	\$ 1.10	\$ 1.41	\$ 1.71	\$ 2.01	\$ 2.77	\$ 3.52	\$ 6.54	\$ 7.45	\$ 9.56		
Age 45-49	\$ 1.01	\$ 1.52	\$ 2.02	\$ 2.53	\$ 3.04	\$ 4.31	\$ 5.58	\$ 10.66	\$ 12.18	\$ 15.74		
Age 50-54	\$ 1.39	\$ 2.27	\$ 3.16	\$ 4.04	\$ 4.93	\$ 7.15	\$ 9.36	\$ 18.22	\$ 20.88	\$ 27.08		
Age 55-59	\$ 1.97	\$ 3.44	\$ 4.90	\$ 6.37	\$ 7.84	\$11.51	\$15.18	\$ 29.86	\$ 34.26	\$ 44.54		
Age 60-64	\$ 2.29	\$ 4.08	\$ 5.87	\$ 7.66	\$ 9.45	\$13.93	\$18.40	\$ 36.30	\$ 41.67	\$ 54.20		
Age 65-69	\$ 4.17	\$ 7.84	\$11.52	\$15.19	\$18.86	\$28.04	\$37.22	\$ 73.94	\$ 84.96	\$110.66		

\$42.73

\$56.80

\$113.10

\$129.99

\$169.40

\$28.65

\$23.02

\$17.39

\$ 6.13

Age 70 and over

\$11.76

^{*}This is optional coverage, and the entire cost of coverage is paid by you. Cost of insurance for all coverage's paid by you may increase or decrease in the future based upon the claims experience of participants. All provisions that apply to this coverage are governed by the Certificate. The life plan rates include a \$.50 administration fee.

^{**}Evidence of Insurability Statement required to add or increase life insurance. The Change for Additional Life Insurance form can be found at http://www.nmrhca.org/forms.aspx/.