

**RETIREE Health Plan Rates as of September 1, 2023**  
 These rates will be reflected in your September 2023 pension check.  
**PLEASE NOTE THAT ALL RATES ARE SUBJECT TO CHANGE**

MONTHLY NON-MEDICARE													
<b>INDIVIDUAL</b>	<b>Aetna EPO</b>	<b>CIGNA</b>	<b>DC37 Med-Team</b>	<b>Empire Blue Access Gated EPO</b>	<b>Empire EPO</b>	<b>GHI-CBP/EB/CSS</b>	<b>GHI HMO</b>	<b>HIP HMO Gold Preferred Plan Grandfathered (closed to new enrollments)</b>	<b>HIP HMO Gold Preferred Plan Standard</b>	<b>HIP Prime POS</b>	<b>MetroPlus Gold Grandfathered (closed to new enrollments)</b>	<b>MetroPlus Gold Standard</b>	<b>Vytra</b>
Basic	\$469.89	\$1,535.05	\$0.00	\$806.58	\$1,195.55	\$0.00	\$284.73	\$0.00	\$0.00	\$1,219.83	\$0.00	\$0.00	\$226.74
Prescription Drugs	\$2,242.23	\$422.26	\$0.00	\$493.73	\$493.73	\$86.25	\$499.29	\$366.20	\$108.68	\$428.03	\$278.97	\$138.93	\$425.71
Rider Other*	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6.31	\$0.00	\$10.35	\$10.35	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total (Basic + Rider*)</b>	<b>\$2,712.06</b>	<b>\$1,957.31</b>	<b>\$0.00</b>	<b>\$1,100.31</b>	<b>\$1,689.28</b>	<b>\$92.56</b>	<b>\$784.02</b>	<b>\$376.55</b>	<b>\$119.03</b>	<b>\$1,647.86</b>	<b>\$278.97</b>	<b>\$138.93</b>	<b>\$652.45</b>
<b>FAMILY</b>	<b>Aetna EPO</b>	<b>CIGNA</b>	<b>DC37 Med-Team</b>	<b>Empire Blue Access Gated EPO</b>	<b>Empire EPO</b>	<b>GHI-CBP/EB/CSS</b>	<b>GHI HMO</b>	<b>HIP HMO Gold Preferred Plan Grandfathered (closed to new enrollments)</b>	<b>HIP HMO Gold Preferred Plan Standard</b>	<b>HIP Prime POS</b>	<b>MetroPlus Gold Grandfathered (closed to new enrollments)</b>	<b>MetroPlus Gold Standard</b>	<b>Vytra</b>
Basic	\$1,910.24	\$4,097.25	\$0.00	\$1,717.50	\$3,036.57	\$0.00	\$818.43	\$0.00	\$0.00	\$2,988.62	\$0.00	\$0.00	\$767.05
Prescription Drugs	\$6,341.74	\$1,277.98	\$0.00	\$1,210.39	\$1,210.39	\$158.11	\$1,273.33	\$897.19	\$199.24	\$1,048.66	\$697.42	\$253.80	\$1,107.58
Rider Other*	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$16.96	\$0.00	\$25.34	\$25.34	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total (Basic + Rider*)</b>	<b>\$8,251.98</b>	<b>\$5,375.23</b>	<b>\$0.00</b>	<b>\$2,927.89</b>	<b>\$4,246.96</b>	<b>\$174.07</b>	<b>\$2,091.76</b>	<b>\$922.53</b>	<b>\$224.58</b>	<b>\$4,037.28</b>	<b>\$697.42</b>	<b>\$253.80</b>	<b>\$1,974.63</b>

\* For GHI-CBP/EB/CSS, "Rider Other" is for enhanced major medical coverage. For HIP HMO, "Rider Other" is for private duty nursing & durable medical equipment.

MONTHLY MEDICARE													
<b>INDIVIDUAL</b>	<b>Aetna Medicare Advantage Plan PPO/ESA (NY/NJ/PA)</b>	<b>Aetna Medicare Advantage Plan PPO/ESA (All Other Areas)</b>	<b>CIGNA Healthspring (AZ)</b>	<b>DC37 Med-Team Senior Care</b>	<b>Empire Medicare Related</b>	<b>Empire Medicare Freedom (PPO)</b>	<b>GHI Senior Care</b>	<b>GHI HMO Medicare Senior Supplement</b>	<b>HIP VP Premier (HMO)</b>	<b>Humana Gold Plus (FL)</b>	<b>United Healthcare Group Medicare Advantage Plan Horizons (NYC)</b>	<b>United Healthcare Group Medicare Advantage Plan Horizons (NJ)</b>	
Basic	\$0.00	\$0.00	\$83.45	\$0.00	\$142.31	\$0.00	\$0.00	\$653.28	\$0.00	\$0.00	\$123.01	\$73.12	
Prescription Drugs	\$108.00	\$79.00	\$0.00	\$0.00	\$200.95	\$127.79	\$125.00	\$85.00	\$177.59	\$74.46	\$84.96	\$112.12	
Rider Other*	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3.25	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<b>Total (Basic + Rider*)</b>	<b>\$108.00</b>	<b>\$79.00</b>	<b>\$83.45</b>	<b>\$0.00</b>	<b>\$343.26</b>	<b>\$127.79</b>	<b>\$128.25</b>	<b>\$738.28</b>	<b>\$177.59</b>	<b>\$74.46</b>	<b>\$207.97</b>	<b>\$185.24</b>	
<b>FAMILY</b>	<b>Aetna Medicare Advantage Plan PPO/ESA (NY/NJ/PA)</b>	<b>Aetna Medicare Advantage Plan PPO/ESA (All Other Areas)</b>	<b>CIGNA Healthspring (AZ)</b>	<b>DC37 Med-Team Senior Care</b>	<b>Empire Medicare Related</b>	<b>Empire Medicare Freedom (PPO)</b>	<b>GHI Senior Care</b>	<b>GHI HMO Medicare Senior Supplement</b>	<b>HIP VP Premier (HMO)</b>	<b>Humana Gold Plus (FL)</b>	<b>United Healthcare Group Medicare Advantage Plan Horizons (NYC)</b>	<b>United Healthcare Group Medicare Advantage Plan Horizons (NJ)</b>	
Basic	\$0.00	\$0.00	\$186.90	\$0.00	\$284.62	\$0.00	\$0.00	\$1,306.56	\$0.00	\$0.00	\$246.02	\$146.24	
Prescription Drugs	\$216.00	\$158.00	\$0.00	\$0.00	\$401.90	\$255.58	\$250.00	\$170.00	\$355.18	\$148.92	\$169.92	\$224.24	
Rider Other*	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6.50	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<b>Total (Basic + Rider*)</b>	<b>\$216.00</b>	<b>\$158.00</b>	<b>\$186.90</b>	<b>\$0.00</b>	<b>\$686.52</b>	<b>\$255.58</b>	<b>\$256.50</b>	<b>\$1,476.56</b>	<b>\$355.18</b>	<b>\$148.92</b>	<b>\$415.94</b>	<b>\$370.48</b>	

\* For GHI Senior Care, "Rider Other" is for 365-Day Hospitalization.  
 NOTE: AvMed, BC Health Options & ElderPlan are "zero" premium plans.