

2024

M O N T H L Y

**TOTAL
PREMIUM**

**COLLEGE
CONTRIB.**

**EMPLOYEE
CONTRIB.**

PRE-65 RETIREES

Capital Blue Cross Standard PPO

RETIREE	\$673.73	\$606.96	\$66.77
SP/SURV SP	673.73	471.61	202.12
RETIREE+SP	1,850.11	1,245.30	604.81
RETIREE/CHILD	1,574.27	1,240.40	333.87
RETIREE/CHILDREN	1,655.01	1,299.08	355.93
FAMILY	1,930.84	1,302.70	628.14

Capital Blue Cross Low Deductible

RETIREE	\$827.22	\$606.96	\$220.26
SP/SURV SP	827.22	471.61	355.61
RETIREE+SP	2,352.15	1,245.30	1,106.85
RETIREE/CHILD	2,001.49	1,240.40	761.09
RETIREE/CHILDREN	2,104.09	1,299.08	805.01
FAMILY	2,454.81	1,302.70	1,152.11

POST-65 RETIREES

Highmark FreedomBlue PPO

RETIREE	\$259.00	\$233.10	\$25.90
SP/SURV SP	259.00	181.30	77.70

Delta Dental PPO

SINGLE COVERAGE	\$33.60	-	\$33.60
TWO-PARTY	67.22	-	67.22
THREE OR MORE	86.92	-	86.92