2017 Baltimore County Government Monthly Insurance Contribution Rates

For Retirees Retired ***On or After July 1, 2007 and Hired Prior to July 1, 2007***

Effective 1/1/2017 through 12/31/2017

Dental and Vision Contributions			
Plan Name	**Coverage Level**	**Non-Medicare Retiree**	**Medicare Retirees/Dependent; Non-Medicare Dependent of Medicare Retiree; Over age 65 Dependent/Retiree**
Carefirst BCBS Traditional Dental	Individual	$ 32.97	$ 32.97
	Parent + 1 Child	$ 49.43	$ 49.43
	Retiree + Spouse	$ 65.92	$ 65.92
	Family	$ 98.92	$ 98.92
Carefirst BCBS Preferred Dental PPO	Individual	$ 6.67	$ 26.70
	Parent + 1 Child	$ 9.46	$ 37.86
	Retiree + Spouse	$ 12.62	$ 50.51
	Family	$ 18.94	$ 75.79
Cigna Dental DHMO	Individual	$ 4.95	$ 19.82
	Parent + 1 Child	$ 9.18	$ 36.73
	Retiree + Spouse	$ 9.89	$ 39.58
	Family	$ 14.91	$ 59.66
Vision	Individual	$ 0.27	$ 2.70
	Parent + 1 Child	$ 0.40	$ 4.06
	Retiree + Spouse	$ 0.54	$ 5.40
	Family	$ 0.81	$ 8.10

Baltimore County Contributions to rates are based on creditable years of service. Please refer to the area of the chart that corresponds to your creditable years of service.

30+ YOS, County Pays 75% of PPO Premium, 85% of OAPIN/HMO, 70% of Medicare Supplemental				
General government employees hired prior to 07/01/2007 who retire with 30 or more years of service and Public Safety retirees with 25 years of service will receive same subsidy as active employees for retiree health plans.				
	Coverage Level	**Total Monthly Premium**	**County Monthly Share**	**Retiree Monthly Share**
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 649.54	$ 216.51
	Parent + 1 Child	$ 1,271.00	$ 953.25	$ 317.75
	Retiree + Spouse	$ 1,848.09	$ 1,386.07	$ 462.02
	Family	$ 2,637.82	$ 1,978.37	$ 659.45
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 583.02	$ 102.88
	Parent + 1 Child	$ 995.76	$ 846.40	$ 149.36
	Retiree + Spouse	$ 1,468.53	$ 1,248.26	$ 220.27
	Family	$ 2,073.79	$ 1,762.73	$ 311.06
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 533.28	$ 94.10
	Parent + 1 Child	$ 910.77	$ 774.16	$ 136.61
	Retiree + Spouse	$ 1,343.22	$ 1,141.74	$ 201.48
	Family	$ 1,896.82	$ 1,612.30	$ 284.52
Cigna Medicare Surround	Individual	$ 438.64	$ 307.05	$ 131.59
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 149.71	$ 64.16
Kaiser Medicare Plus	Individual	$ 341.71	$ 239.20	$ 102.51
Non-Medicare Dep of Medicare Retiree; Over Age 65 Retiree/Dep not eligible for Medicare, County Pays 70%				
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 606.24	$ 259.81
	Parent + 1 Child	$ 1,271.00	$ 889.70	$ 381.30
	Retiree + Spouse	$ 1,848.09	$ 1,293.67	$ 554.42
	Family	$ 2,637.82	$ 1,846.48	$ 791.34
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 480.13	$ 205.77
	Parent + 1 Child	$ 995.76	$ 697.04	$ 298.72
	Retiree + Spouse	$ 1,468.53	$ 1,027.98	$ 440.55
	Family	$ 2,073.79	$ 1,451.66	$ 622.13
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 439.17	$ 188.21
	Parent + 1 Child	$ 910.77	$ 637.54	$ 273.23
	Retiree + Spouse	$ 1,343.22	$ 940.26	$ 402.96
	Family	$ 1,896.82	$ 1,327.78	$ 569.04

* You have the right to opt out of the County's Medicare Part D Prescription plan. This means that you may elect the Cigna Medicare Surround plan as a Medicare supplement only and you may purchase an independent Medicare Part D Prescription plan. Please see the rates provided above to evaluate whether an independent Part D plan might be more cost effective for you. Please visit medicare.gov or call 1-800-633-4227 for details.

2017 Baltimore County Government Monthly Insurance Contribution Rates

For Retirees Retired ***On or After July 1, 2007 and Hired Prior to July 1, 2007***

Effective 1/1/2017 through 12/31/2017

29 YOS, County Pays 71.5% of PPO Premium, 80% of OAPIN/HMO, 67.5% of Medicare Supplemental				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 619.23	$ 246.82
	Parent + 1 Child	$ 1,271.00	$ 908.77	$ 362.23
	Retiree + Spouse	$ 1,848.09	$ 1,321.39	$ 526.70
	Family	$ 2,637.82	$ 1,886.05	$ 751.77
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 548.72	$ 137.18
	Parent + 1 Child	$ 995.76	$ 796.61	$ 199.15
	Retiree + Spouse	$ 1,468.53	$ 1,174.83	$ 293.70
	Family	$ 2,073.79	$ 1,659.04	$ 414.75
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 501.91	$ 125.47
	Parent + 1 Child	$ 910.77	$ 728.62	$ 182.15
	Retiree + Spouse	$ 1,343.22	$ 1,074.58	$ 268.64
	Family	$ 1,896.82	$ 1,517.46	$ 379.36
Cigna Medicare Surround	Individual	$ 438.64	$ 296.09	$ 142.55
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 144.37	$ 69.50
Kaiser Medicare Plus	Individual	$ 341.71	$ 230.66	$ 111.05
Non-Medicare Dep of Medicare Retiree; Over Age 65 Retiree/Dep not eligible for Medicare County Pays 67.5%				
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 584.59	$ 281.46
	Parent + 1 Child	$ 1,271.00	$ 857.93	$ 413.07
	Retiree + Spouse	$ 1,848.09	$ 1,247.47	$ 600.62
	Family	$ 2,637.82	$ 1,780.53	$ 857.29
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 462.99	$ 222.91
	Parent + 1 Child	$ 995.76	$ 672.14	$ 323.62
	Retiree + Spouse	$ 1,468.53	$ 991.26	$ 477.27
	Family	$ 2,073.79	$ 1,399.81	$ 673.98
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 423.49	$ 203.89
	Parent + 1 Child	$ 910.77	$ 614.77	$ 296.00
	Retiree + Spouse	$ 1,343.22	$ 906.68	$ 436.54
	Family	$ 1,896.82	$ 1,280.36	$ 616.46

28 YOS County Pays 68.2% of PPO Premium, 75% of OAPIN/HMO, 65% of Medicare Supplemental				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 590.65	$ 275.40
	Parent + 1 Child	$ 1,271.00	$ 866.83	$ 404.17
	Retiree + Spouse	$ 1,848.09	$ 1,260.40	$ 587.69
	Family	$ 2,637.82	$ 1,799.00	$ 838.82
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 514.43	$ 171.47
	Parent + 1 Child	$ 995.76	$ 746.82	$ 248.94
	Retiree + Spouse	$ 1,468.53	$ 1,101.40	$ 367.13
	Family	$ 2,073.79	$ 1,555.35	$ 518.44
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 470.54	$ 156.84
	Parent + 1 Child	$ 910.77	$ 683.08	$ 227.69
	Retiree + Spouse	$ 1,343.22	$ 1,007.42	$ 335.80
	Family	$ 1,896.82	$ 1,422.62	$ 474.20
Cigna Medicare Surround	Individual	$ 438.64	$ 285.12	$ 153.52
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 139.02	$ 74.85
Kaiser Medicare Plus	Individual	$ 341.71	$ 222.12	$ 119.59
Non-Medicare Dep of Medicare Retiree; Over Age 65 Retiree/Dep not eligible for Medicare, County Pays 65%				
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 562.94	$ 303.11
	Parent + 1 Child	$ 1,271.00	$ 826.15	$ 444.85
	Retiree + Spouse	$ 1,848.09	$ 1,201.26	$ 646.83
	Family	$ 2,637.82	$ 1,714.59	$ 923.23
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 445.84	$ 240.06
	Parent + 1 Child	$ 995.76	$ 647.25	$ 348.51
	Retiree + Spouse	$ 1,468.53	$ 954.55	$ 513.98
	Family	$ 2,073.79	$ 1,347.97	$ 725.82
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 407.80	$ 219.58
	Parent + 1 Child	$ 910.77	$ 592.01	$ 318.76
	Retiree + Spouse	$ 1,343.22	$ 873.10	$ 470.12
	Family	$ 1,896.82	$ 1,232.94	$ 663.88

* You have the right to opt out of the County's Medicare Part D Prescription plan. This means that you may elect the Cigna Medicare Surround plan as a Medicare supplement only and you may purchase an independent Medicare Part D Prescription plan. Please see the rates provided above to evaluate whether an independent Part D plan might be more cost effective for you. Please visit medicare.gov or call 1-800-633-4227 for details.

2017 Baltimore County Government Monthly Insurance Contribution Rates

For Retirees Retired ***On or After July 1, 2007 and Hired Prior to July 1, 2007***

Effective 1/1/2017 through 12/31/2017

27 YOS, County Pays 64.9% of PPO Premium, 70% of OAPIN/HMO, 62.5% of Medicare Supplemental				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 562.07	$ 303.98
	Parent + 1 Child	$ 1,271.00	$ 824.88	$ 446.12
	Retiree + Spouse	$ 1,848.09	$ 1,199.42	$ 648.67
	Family	$ 2,637.82	$ 1,711.95	$ 925.87
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 480.13	$ 205.77
	Parent + 1 Child	$ 995.76	$ 697.04	$ 298.72
	Retiree + Spouse	$ 1,468.53	$ 1,027.98	$ 440.55
	Family	$ 2,073.79	$ 1,451.66	$ 622.13
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 439.17	$ 188.21
	Parent + 1 Child	$ 910.77	$ 637.54	$ 273.23
	Retiree + Spouse	$ 1,343.22	$ 940.26	$ 402.96
	Family	$ 1,896.82	$ 1,327.78	$ 569.04
Cigna Medicare Surround	Individual	$ 438.64	$ 274.15	$ 164.49
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 133.67	$ 80.20
Kaiser Medicare Plus	Individual	$ 341.71	$ 213.57	$ 128.14
Non-Medicare Dep of Medicare Retiree; Over Age 65 Retiree/Dep not eligible for Medicare County Pays 62.5%				
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 541.29	$ 324.76
	Parent + 1 Child	$ 1,271.00	$ 794.38	$ 476.62
	Retiree + Spouse	$ 1,848.09	$ 1,155.06	$ 693.03
	Family	$ 2,637.82	$ 1,648.64	$ 989.18
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 428.69	$ 257.21
	Parent + 1 Child	$ 995.76	$ 622.35	$ 373.41
	Retiree + Spouse	$ 1,468.53	$ 917.84	$ 550.69
	Family	$ 2,073.79	$ 1,296.12	$ 777.67
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 392.12	$ 235.26
	Parent + 1 Child	$ 910.77	$ 569.24	$ 341.53
	Retiree + Spouse	$ 1,343.22	$ 839.52	$ 503.70
	Family	$ 1,896.82	$ 1,185.52	$ 711.30

26 YOS, County Pays 61.6% of PPO Premium, 65% of OAPIN/HMO, 60% of Medicare Supplemental				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 533.49	$ 332.56
	Parent + 1 Child	$ 1,271.00	$ 782.94	$ 488.06
	Retiree + Spouse	$ 1,848.09	$ 1,138.43	$ 709.66
	Family	$ 2,637.82	$ 1,624.90	$ 1,012.92
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 445.84	$ 240.06
	Parent + 1 Child	$ 995.76	$ 647.25	$ 348.51
	Retiree + Spouse	$ 1,468.53	$ 954.55	$ 513.98
	Family	$ 2,073.79	$ 1,347.97	$ 725.82
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 407.80	$ 219.58
	Parent + 1 Child	$ 910.77	$ 592.01	$ 318.76
	Retiree + Spouse	$ 1,343.22	$ 873.10	$ 470.12
	Family	$ 1,896.82	$ 1,232.94	$ 663.88
Cigna Medicare Surround	Individual	$ 438.64	$ 263.19	$ 175.45
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 128.33	$ 85.54
Kaiser Medicare Plus	Individual	$ 341.71	$ 205.03	$ 136.68
Non-Medicare Dep of Medicare Retiree; Over Age 65 Retiree/Dep not eligible for Medicare County Pays 60%				
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 519.63	$ 346.42
	Parent + 1 Child	$ 1,271.00	$ 762.60	$ 508.40
	Retiree + Spouse	$ 1,848.09	$ 1,108.86	$ 739.23
	Family	$ 2,637.82	$ 1,582.70	$ 1,055.12
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 411.54	$ 274.36
	Parent + 1 Child	$ 995.76	$ 597.46	$ 398.30
	Retiree + Spouse	$ 1,468.53	$ 881.12	$ 587.41
	Family	$ 2,073.79	$ 1,244.28	$ 829.51
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 376.43	$ 250.95
	Parent + 1 Child	$ 910.77	$ 546.47	$ 364.30
	Retiree + Spouse	$ 1,343.22	$ 805.94	$ 537.28
	Family	$ 1,896.82	$ 1,138.10	$ 758.72

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2017 Baltimore County Government Monthly Insurance Contribution Rates

For Retirees Retired ***On or After July 1, 2007 and Hired Prior to July 1, 2007***

Effective 1/1/2017 through 12/31/2017

25 YOS, County Pays 58.3% of PPO Premium, 60% of OAPIN/HMO, 57.5% of Medicare Supplemental				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 504.91	$ 361.14
	Parent + 1 Child	$ 1,271.00	$ 741.00	$ 530.00
	Retiree + Spouse	$ 1,848.09	$ 1,077.44	$ 770.65
	Family	$ 2,637.82	$ 1,537.85	$ 1,099.97
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 411.54	$ 274.36
	Parent + 1 Child	$ 995.76	$ 597.46	$ 398.30
	Retiree + Spouse	$ 1,468.53	$ 881.12	$ 587.41
	Family	$ 2,073.79	$ 1,244.28	$ 829.51
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 376.43	$ 250.95
	Parent + 1 Child	$ 910.77	$ 546.47	$ 364.30
	Retiree + Spouse	$ 1,343.22	$ 805.94	$ 537.28
	Family	$ 1,896.82	$ 1,138.10	$ 758.72
Cigna Medicare Surround	Individual	$ 438.64	$ 252.22	$ 186.42
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 122.98	$ 90.89
Kaiser Medicare Plus	Individual	$ 341.71	$ 196.49	$ 145.22
Non-Medicare Dep of Medicare Retiree; Over Age 65 Retiree/Dep not eligible for Medicare County Pays 57.5%				
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 497.98	$ 368.07
	Parent + 1 Child	$ 1,271.00	$ 730.83	$ 540.17
	Retiree + Spouse	$ 1,848.09	$ 1,062.66	$ 785.43
	Family	$ 2,637.82	$ 1,516.75	$ 1,121.07
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 394.40	$ 291.50
	Parent + 1 Child	$ 995.76	$ 572.57	$ 423.19
	Retiree + Spouse	$ 1,468.53	$ 844.41	$ 624.12
	Family	$ 2,073.79	$ 1,192.43	$ 881.36
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 360.75	$ 266.63
	Parent + 1 Child	$ 910.77	$ 523.70	$ 387.07
	Retiree + Spouse	$ 1,343.22	$ 772.36	$ 570.86
	Family	$ 1,896.82	$ 1,090.68	$ 806.14

AT 25 YOS, PUBLIC SAFETY RETIREES RECEIVE SAME SUBSIDY AS AVAILABLE FOR ACTIVE EMPLOYEES AT THE TIME OF THEIR RETIREMENT FOR PRE-MEDICARE PLANS AND 72% OF PREMIUM FOR MEDICARE PLANS (INCLUDING SPOUSES). REFER TO RATES FOR 30 YEARS OF SERVICE.

24 YOS, County Pays 55% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 476.33	$ 389.72
	Parent + 1 Child	$ 1,271.00	$ 699.05	$ 571.95
	Retiree + Spouse	$ 1,848.09	$ 1,016.45	$ 831.64
	Family	$ 2,637.82	$ 1,450.81	$ 1,187.01
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 377.25	$ 308.65
	Parent + 1 Child	$ 995.76	$ 547.67	$ 448.09
	Retiree + Spouse	$ 1,468.53	$ 807.70	$ 660.83
	Family	$ 2,073.79	$ 1,140.59	$ 933.20
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 345.06	$ 282.32
	Parent + 1 Child	$ 910.77	$ 500.93	$ 409.84
	Retiree + Spouse	$ 1,343.22	$ 738.78	$ 604.44
	Family	$ 1,896.82	$ 1,043.26	$ 853.56
Cigna Medicare Surround	Individual	$ 438.64	$ 241.26	$ 197.38
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 117.63	$ 96.24
Kaiser Medicare Plus	Individual	$ 341.71	$ 187.95	$ 153.76

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For Retirees Retired ***On or After July 1, 2007 and Hired Prior to July 1, 2007***

Effective 1/1/2017 through 12/31/2017

23 YOS, County Pays 53% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 459.01	$ 407.04
	Parent + 1 Child	$ 1,271.00	$ 673.63	$ 597.37
	Retiree + Spouse	$ 1,848.09	$ 979.49	$ 868.60
	Family	$ 2,637.82	$ 1,398.05	$ 1,239.77
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 363.53	$ 322.37
	Parent + 1 Child	$ 995.76	$ 527.76	$ 468.00
	Retiree + Spouse	$ 1,468.53	$ 778.33	$ 690.20
	Family	$ 2,073.79	$ 1,099.11	$ 974.68
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 332.52	$ 294.86
	Parent + 1 Child	$ 910.77	$ 482.71	$ 428.06
	Retiree + Spouse	$ 1,343.22	$ 711.91	$ 631.31
	Family	$ 1,896.82	$ 1,005.32	$ 891.50
Cigna Medicare Surround	Individual	$ 438.64	$ 232.48	$ 206.16
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 113.36	$ 100.51
Kaiser Medicare Plus	Individual	$ 341.71	$ 181.11	$ 160.60

22 YOS, County Pays 51% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 441.69	$ 424.36
	Parent + 1 Child	$ 1,271.00	$ 648.21	$ 622.79
	Retiree + Spouse	$ 1,848.09	$ 942.53	$ 905.56
	Family	$ 2,637.82	$ 1,345.29	$ 1,292.53
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 349.81	$ 336.09
	Parent + 1 Child	$ 995.76	$ 507.84	$ 487.92
	Retiree + Spouse	$ 1,468.53	$ 748.96	$ 719.57
	Family	$ 2,073.79	$ 1,057.64	$ 1,016.15
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 319.97	$ 307.41
	Parent + 1 Child	$ 910.77	$ 464.50	$ 446.27
	Retiree + Spouse	$ 1,343.22	$ 685.05	$ 658.17
	Family	$ 1,896.82	$ 967.38	$ 929.44
Cigna Medicare Surround	Individual	$ 438.64	$ 223.71	$ 214.93
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 109.08	$ 104.79
Kaiser Medicare Plus	Individual	$ 341.71	$ 174.28	$ 167.43

21 YOS, County Pays 49% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 424.37	$ 441.68
	Parent + 1 Child	$ 1,271.00	$ 622.79	$ 648.21
	Retiree + Spouse	$ 1,848.09	$ 905.57	$ 942.52
	Family	$ 2,637.82	$ 1,292.54	$ 1,345.28
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 336.10	$ 349.80
	Parent + 1 Child	$ 995.76	$ 487.93	$ 507.83
	Retiree + Spouse	$ 1,468.53	$ 719.58	$ 748.95
	Family	$ 2,073.79	$ 1,016.16	$ 1,057.63
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 307.42	$ 319.96
	Parent + 1 Child	$ 910.77	$ 446.28	$ 464.49
	Retiree + Spouse	$ 1,343.22	$ 658.18	$ 685.04
	Family	$ 1,896.82	$ 929.45	$ 967.37
Cigna Medicare Surround	Individual	$ 438.64	$ 214.94	$ 223.70
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 104.80	$ 109.07
Kaiser Medicare Plus	Individual	$ 341.71	$ 174.27	$ 167.43

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2017 Baltimore County Government Monthly Insurance Contribution Rates

For Retirees Retired ***On or After July 1, 2007 and Hired Prior to July 1, 2007***

Effective 1/1/2017 through 12/31/2017

20 YOS, County Pays 47% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 407.05	$ 459.00
	Parent + 1 Child	$ 1,271.00	$ 597.37	$ 673.63
	Retiree + Spouse	$ 1,848.09	$ 868.61	$ 979.48
	Family	$ 2,637.82	$ 1,239.78	$ 1,398.04
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 322.38	$ 363.52
	Parent + 1 Child	$ 995.76	$ 468.01	$ 527.75
	Retiree + Spouse	$ 1,468.53	$ 690.21	$ 778.32
	Family	$ 2,073.79	$ 974.69	$ 1,099.10
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 294.87	$ 332.51
	Parent + 1 Child	$ 910.77	$ 428.07	$ 482.70
	Retiree + Spouse	$ 1,343.22	$ 631.32	$ 711.90
	Family	$ 1,896.82	$ 891.51	$ 1,005.31
Cigna Medicare Surround	Individual	$ 438.64	$ 206.17	$ 232.47
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 100.52	$ 113.35
Kaiser Medicare Plus	Individual	$ 341.71	$ 160.61	$ 181.10

19 YOS, County Pays 42.5% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 368.08	$ 497.97
	Parent + 1 Child	$ 1,271.00	$ 540.18	$ 730.82
	Retiree + Spouse	$ 1,848.09	$ 785.44	$ 1,062.65
	Family	$ 2,637.82	$ 1,121.08	$ 1,516.74
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 291.51	$ 394.39
	Parent + 1 Child	$ 995.76	$ 423.20	$ 572.56
	Retiree + Spouse	$ 1,468.53	$ 624.13	$ 844.40
	Family	$ 2,073.79	$ 881.37	$ 1,192.42
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 266.64	$ 360.74
	Parent + 1 Child	$ 910.77	$ 387.08	$ 523.69
	Retiree + Spouse	$ 1,343.22	$ 570.87	$ 772.35
	Family	$ 1,896.82	$ 806.15	$ 1,090.67
Cigna Medicare Surround	Individual	$ 438.64	$ 186.43	$ 252.21
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 90.90	$ 122.97
Kaiser Medicare Plus	Individual	$ 341.71	$ 145.23	$ 196.48

18 YOS, County Pays 40% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 346.42	$ 519.63
	Parent + 1 Child	$ 1,271.00	$ 508.40	$ 762.60
	Retiree + Spouse	$ 1,848.09	$ 739.24	$ 1,108.85
	Family	$ 2,637.82	$ 1,055.13	$ 1,582.69
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 274.36	$ 411.54
	Parent + 1 Child	$ 995.76	$ 398.31	$ 597.45
	Retiree + Spouse	$ 1,468.53	$ 587.42	$ 881.11
	Family	$ 2,073.79	$ 829.52	$ 1,244.27
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 250.96	$ 376.42
	Parent + 1 Child	$ 910.77	$ 364.31	$ 546.46
	Retiree + Spouse	$ 1,343.22	$ 537.29	$ 805.93
	Family	$ 1,896.82	$ 758.73	$ 1,138.09
Cigna Medicare Surround	Individual	$ 438.64	$ 175.46	$ 263.18
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 85.55	$ 128.32
Kaiser Medicare Plus	Individual	$ 341.71	$ 136.69	$ 205.02

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2017 Baltimore County Government Monthly Insurance Contribution Rates

For Retirees Retired ***On or After July 1, 2007 and Hired Prior to July 1, 2007***

Effective 1/1/2017 through 12/31/2017

17 YOS, County Pays 37.5% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 324.77	$ 541.28
	Parent + 1 Child	$ 1,271.00	$ 476.63	$ 794.37
	Retiree + Spouse	$ 1,848.09	$ 693.04	$ 1,155.05
	Family	$ 2,637.82	$ 989.19	$ 1,648.63
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 257.22	$ 428.68
	Parent + 1 Child	$ 995.76	$ 373.41	$ 622.35
	Retiree + Spouse	$ 1,468.53	$ 550.70	$ 917.83
	Family	$ 2,073.79	$ 777.68	$ 1,296.11
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 235.27	$ 392.11
	Parent + 1 Child	$ 910.77	$ 341.54	$ 569.23
	Retiree + Spouse	$ 1,343.22	$ 503.71	$ 839.51
	Family	$ 1,896.82	$ 711.31	$ 1,185.51
Cigna Medicare Surround	Individual	$ 438.64	$ 164.49	$ 274.15
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 80.21	$ 133.66
Kaiser Medicare Plus	Individual	$ 341.71	$ 128.15	$ 213.56

16 YOS, County Pays 35% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 303.12	$ 562.93
	Parent + 1 Child	$ 1,271.00	$ 444.85	$ 826.15
	Retiree + Spouse	$ 1,848.09	$ 646.84	$ 1,201.25
	Family	$ 2,637.82	$ 923.24	$ 1,714.58
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 240.07	$ 445.83
	Parent + 1 Child	$ 995.76	$ 348.52	$ 647.24
	Retiree + Spouse	$ 1,468.53	$ 513.99	$ 954.54
	Family	$ 2,073.79	$ 725.83	$ 1,347.96
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 219.59	$ 407.79
	Parent + 1 Child	$ 910.77	$ 318.77	$ 592.00
	Retiree + Spouse	$ 1,343.22	$ 470.13	$ 873.09
	Family	$ 1,896.82	$ 663.89	$ 1,232.93
Cigna Medicare Surround	Individual	$ 438.64	$ 153.53	$ 285.11
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 74.86	$ 139.01
Kaiser Medicare Plus	Individual	$ 341.71	$ 119.60	$ 222.11

15 YOS, County Pays 32.5% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 281.47	$ 584.58
	Parent + 1 Child	$ 1,271.00	$ 413.08	$ 857.92
	Retiree + Spouse	$ 1,848.09	$ 600.63	$ 1,247.46
	Family	$ 2,637.82	$ 857.30	$ 1,780.52
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 222.92	$ 462.98
	Parent + 1 Child	$ 995.76	$ 323.63	$ 672.13
	Retiree + Spouse	$ 1,468.53	$ 477.28	$ 991.25
	Family	$ 2,073.79	$ 673.99	$ 1,399.80
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 203.90	$ 423.48
	Parent + 1 Child	$ 910.77	$ 296.01	$ 614.76
	Retiree + Spouse	$ 1,343.22	$ 436.55	$ 906.67
	Family	$ 1,896.82	$ 616.47	$ 1,280.35
Cigna Medicare Surround	Individual	$ 438.64	$ 142.56	$ 296.08
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 69.51	$ 144.36
Kaiser Medicare Plus	Individual	$ 341.71	$ 111.06	$ 230.65

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2017 Baltimore County Government Monthly Insurance Contribution Rates

For Retirees Retired ***On or After July 1, 2007 and Hired Prior to July 1, 2007***

Effective 1/1/2017 through 12/31/2017

14 YOS, County Pays 30% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 259.82	$ 606.23
	Parent + 1 Child	$ 1,271.00	$ 381.30	$ 889.70
	Retiree + Spouse	$ 1,848.09	$ 554.43	$ 1,293.66
	Family	$ 2,637.82	$ 791.35	$ 1,846.47
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 205.77	$ 480.13
	Parent + 1 Child	$ 995.76	$ 298.73	$ 697.03
	Retiree + Spouse	$ 1,468.53	$ 440.56	$ 1,027.97
	Family	$ 2,073.79	$ 622.14	$ 1,451.65
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 188.22	$ 439.16
	Parent + 1 Child	$ 910.77	$ 273.24	$ 637.53
	Retiree + Spouse	$ 1,343.22	$ 402.97	$ 940.25
	Family	$ 1,896.82	$ 569.05	$ 1,327.77
Cigna Medicare Surround	Individual	$ 438.64	$ 131.60	$ 307.04
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 64.17	$ 149.70
Kaiser Medicare Plus	Individual	$ 341.71	$ 102.52	$ 239.19

13 YOS, County Pays 27.5% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 238.17	$ 627.88
	Parent + 1 Child	$ 1,271.00	$ 349.53	$ 921.47
	Retiree + Spouse	$ 1,848.09	$ 508.23	$ 1,339.86
	Family	$ 2,637.82	$ 725.41	$ 1,912.41
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 188.63	$ 497.27
	Parent + 1 Child	$ 995.76	$ 273.84	$ 721.92
	Retiree + Spouse	$ 1,468.53	$ 403.85	$ 1,064.68
	Family	$ 2,073.79	$ 570.30	$ 1,503.49
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 172.53	$ 454.85
	Parent + 1 Child	$ 910.77	$ 250.47	$ 660.30
	Retiree + Spouse	$ 1,343.22	$ 369.39	$ 973.83
	Family	$ 1,896.82	$ 521.63	$ 1,375.19
Cigna Medicare Surround	Individual	$ 438.64	$ 120.63	$ 318.01
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 58.82	$ 155.05
Kaiser Medicare Plus	Individual	$ 341.71	$ 93.98	$ 247.73

12 YOS, County Pays 25% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 216.52	$ 649.53
	Parent + 1 Child	$ 1,271.00	$ 317.75	$ 953.25
	Retiree + Spouse	$ 1,848.09	$ 462.03	$ 1,386.06
	Family	$ 2,637.82	$ 659.46	$ 1,978.36
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 171.48	$ 514.42
	Parent + 1 Child	$ 995.76	$ 248.94	$ 746.82
	Retiree + Spouse	$ 1,468.53	$ 367.14	$ 1,101.39
	Family	$ 2,073.79	$ 518.45	$ 1,555.34
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 156.85	$ 470.53
	Parent + 1 Child	$ 910.77	$ 227.70	$ 683.07
	Retiree + Spouse	$ 1,343.22	$ 335.81	$ 1,007.41
	Family	$ 1,896.82	$ 474.21	$ 1,422.61
Cigna Medicare Surround	Individual	$ 438.64	$ 109.66	$ 328.98
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 53.47	$ 160.40
Kaiser Medicare Plus	Individual	$ 341.71	$ 85.43	$ 256.28

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2017 Baltimore County Government Monthly Insurance Contribution Rates

For Retirees Retired ***On or After July 1, 2007 and Hired Prior to July 1, 2007***

Effective 1/1/2017 through 12/31/2017

11 YOS, County Pays 22.5% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 194.87	$ 671.18
	Parent + 1 Child	$ 1,271.00	$ 285.98	$ 985.02
	Retiree + Spouse	$ 1,848.09	$ 415.83	$ 1,432.26
	Family	$ 2,637.82	$ 593.51	$ 2,044.31
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 154.33	$ 531.57
	Parent + 1 Child	$ 995.76	$ 224.05	$ 771.71
	Retiree + Spouse	$ 1,468.53	$ 330.42	$ 1,138.11
	Family	$ 2,073.79	$ 466.61	$ 1,607.18
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 141.17	$ 486.21
	Parent + 1 Child	$ 910.77	$ 204.93	$ 705.84
	Retiree + Spouse	$ 1,343.22	$ 302.23	$ 1,040.99
	Family	$ 1,896.82	$ 426.79	$ 1,470.03
Cigna Medicare Surround	Individual	$ 438.64	$ 98.70	$ 339.94
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 48.13	$ 165.74
Kaiser Medicare Plus	Individual	$ 341.71	$ 76.89	$ 264.82

10 YOS, County Pays 20% of Premium				
	Coverage Level	Total Monthly Premium	County Monthly Share	Retiree Monthly Share
Cigna OAP (In & Out of Network)	Individual	$ 866.05	$ 173.21	$ 692.84
	Parent + 1 Child	$ 1,271.00	$ 254.20	$ 1,016.80
	Retiree + Spouse	$ 1,848.09	$ 369.62	$ 1,478.47
	Family	$ 2,637.82	$ 527.57	$ 2,110.25
Cigna OAPIN (In Network Only)	Individual	$ 685.90	$ 137.18	$ 548.72
	Parent + 1 Child	$ 995.76	$ 199.16	$ 796.60
	Retiree + Spouse	$ 1,468.53	$ 293.71	$ 1,174.82
	Family	$ 2,073.79	$ 414.76	$ 1,659.03
Kaiser Permanente Select HMO	Individual	$ 627.38	$ 125.48	$ 501.90
	Parent + 1 Child	$ 910.77	$ 182.16	$ 728.61
	Retiree + Spouse	$ 1,343.22	$ 268.65	$ 1,074.57
	Family	$ 1,896.82	$ 379.37	$ 1,517.45
Cigna Medicare Surround	Individual	$ 438.64	$ 87.73	$ 350.91
****Cigna Medicare Surround without Rx***	Individual	$ 213.87	$ 42.78	$ 171.09
Kaiser Medicare Plus	Individual	$ 341.71	$ 68.35	$ 273.36

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