2024 RETIREE RATE INFORMATION - Effective 1/1/24-12/31/24

DENTAL		
UNDER AGE 65		
BCBS Dental (0006)	Monthly Cost	
Single	\$ 35.60	
2Person	\$ 71.19	
Family	\$ 124.58	
UNDER AGE 65 AND 1 OVER AGE 65		
BCBS Dental (0006)	Monthly Cost	
1 Reg +1 Comp	\$ 70.25	
2 Reg + 1 Comp	A	
z Keg + i Comp	\$ 105.84	
	AGE 65	
	¥	
OVER	AGE 65	

VISION		
UNDER AGE 65		
BCBS Vision (0007)	Monthly Cost	
Single	\$ 10.42	
2Person	\$ 20.84	
Family	\$ 34.59	
UNDER AGE 65 AND 1 OVER AGE 65		
BCBS Vision (0007)	Monthly Cost	
	,	
1 Reg +1 Comp	\$ 18.85	
1 Reg +1 Comp 2 Reg + 1 Comp	·	
2 Reg + 1 Comp	\$ 18.85	
2 Reg + 1 Comp	\$ 18.85 \$ 29.27	
2 Reg + 1 Comp OVER	\$ 18.85 \$ 29.27 AGE 65	

HEALTH PLAN - OVER AGE 65	
BCBS Medicare Advantage Plan	Monthly Cost Per Covered Member
	\$ 176.04
You must be enrolled in Medicare A & B	This rate is for only one person
INICUICATE A & D	person

If you are enrolling in the Medicare Advantage Plan, there is a 60-day implementation period to process the application. You will also need to enroll for Medicare A & B in order to obtain this coverage. Allow three months for the sign up period for Medicare A & B.

HEALTH PLAN -	- UNDER AGE 65
High Deductible Health Plan (0024)	Monthly Cost
Single	\$ 567.52
2 Person	\$ 1,357.71
Family	\$ 1,696.78
HEALTH PLAN -	- UNDER AGE 65
BCBS Simply Blue 1000 (0016)	Monthly Cost
Single	\$ 602.08
2Person	\$ 1,444.99
Family	\$ 1,806.23

Administration Fee - WEX (1-866-451-3399) \$3.95/month/household

A summary of the plans and rates can be found at:

https://my.svsu.edu/apps/63489/pages/retirement-planning/default