

2025 Retiree Health Coverage Monthly Contribution Rates

Retiree Medical for Pre-65 Retiree and/or Pre-65 Spouse/Dependent of Retiree (including NY CBU)

Plan	Retiree Only	Retiree Plus One	Retiree Plus Family
Aetna HDHP	\$1,076.00	\$2,070.00	\$3,638.00
Aetna PPO	\$1,654.00	\$3,182.00	\$5,594.00
Aetna EPO – CA, GA, NJ, NY, D.C.	\$3,339.69	\$11,913.46	\$15,696.16
Emblem Health – HIP HMO	\$2,717.68	\$4,962.51	\$7,900.31
Kaiser Northern CA HMO	\$1,440.85	\$2,881.71	\$4,077.64
Kaiser Southern CA HMO	\$1,440.85	\$2,881.71	\$4,077.64

Retiree Dental (except NY CBU retirees)

Plan	Retiree Only	Retiree Plus One	Retiree Plus Family
Guardian Dental	\$52.00	\$100.00	\$176.00

NY CBU Retiree Dental

Plan	Retiree Only	Retiree Plus One	Retiree Plus Family
Guardian Dental	\$35.96	\$69.16	\$121.72

Retiree Medical for Age 65 Plus Medicare-Eligible Retiree and/or Age 65 Plus Spouse of Retiree

Plan	Retiree or Spouse Only	Retiree Plus One	Retiree Plus Family
United Healthcare Medicare Advantage Plan (includes Rx)	\$319	N/A	N/A

2025 COBRA Continuation Coverage Monthly Rates

COBRA Medical, Dental, Vision (including NY CBU)

Plan	Employee Only	Employee Plus One	Employee Plus Family
Aetna HDHP	\$645.66	\$1,242.36	\$2,183.82
Aetna PPO	\$1,098.54	\$2,113.44	\$3,715.86
Aetna EPO – CA, GA, NJ, NY, D.C.	\$2,196.97	\$7,837.14	\$10,325.56
Emblem Health – HIP HMO	\$1,648.48	\$3,010.14	\$4,792.14
Kaiser Northern CA HMO	\$1,009.70	\$2,019.40	\$2,857.46
Kaiser Southern CA HMO	\$1,009.70	\$2,019.40	\$2,857.46
Guardian Dental	\$53.04	\$102.00	\$179.52
Vision			
Base Plan	\$14.05	\$27.92	\$44.88
Buy-Up Plan	\$22.54	\$44.49	\$71.36
Lyra Health EAP	\$7.03	\$7.03	\$7.03

COBRA Dental for NY CBU

Plan	Employee Only	Employee Plus One	Employee Plus Family
Guardian Dental	\$36.68	\$70.54	\$124.15