



2022 Retiree Healthcare Rate Sheet

UNDER AGE 65 OR OVER AGE 65 AND NOT MEDICARE ELIGIBLE

Coverage	OAP High	OAP Standard	SureFit*
Retiree Only	\$ 771.00	\$ 746.00	\$ 724.00
Dependents Under Age 65 or Over Age 65 and not Medicare eligible.			
Spouse/Domestic Partner	\$ 1,089.00	\$ 1,054.00	\$ 1,022.00
Child(ren)	\$ 766.00	\$ 742.00	\$ 719.00
Family	\$ 2,180.00	\$ 2,110.00	\$ 2,046.00
Adult Dependent Child	\$ 655.00	\$ 634.00	\$ 615.00

*At the time of enrollment, a Primary Care Physician (PCP) is required and you must live in the tri-county area (Miami-Dade, Broward and Palm Beach Counties).

NOTE: You must add the Retiree Only rate to the Dependent rate to get the total monthly premium.

OVER AGE 65 OR UNDER AGE 65 MEDICARE ELIGIBLE

Medicare Healthcare (Medical & Pharmacy) Plans Monthly Rates:

Provider	Plan	Rates
AvMed*	Access HMO-POS (Miami-Dade County Only; Broward County Only)	\$ 0.00
	Choice HMO (Miami-Dade County Only; Broward County Only)	\$ 0.00
	Circle HMO (Miami-Dade County Only; Broward County Only)	\$ 0.00
	Premium Saver HMO (Broward County Only)	\$ 0.00
Cigna Leon Cares	Zero Premium HMO	\$ 0.00
Humana*	Zero Premium HMO	\$ 0.00
	Passive PPO	\$ 388.14
	Traditional PPO	\$ 252.75
UnitedHealthcare	Differential PPO	\$ 187.53
	Passive PPO	\$ 312.38

NOTE: *At the time of enrollment, a Primary Care Physician (PCP) is required for the AvMed Medicare Access HMO-POS, AvMed Medicare Choice HMO, AvMed Medicare Circle HMO, AvMed Medicare Premium Saver HMO and the Humana Zero Premium HMO plans.

UnitedHealthcare Medicare Supplement Plans:

Please be advised that the Supplement rates are based on the applicant's date of birth, place of residence and tobacco usage. Rates for calendar year 2022 receive CMS approval in November. To receive your individual rate, please contact the healthcare company directly. Pre-65 Medicare recipients are not eligible for these supplement plans.

UnitedHealthcare Pharmacy Plans (Medicare Part D only)

4-Tier High	4-Tier Low	5-Tier Standard
\$316.92	\$128.00	\$134.81