

Retiree Monthly Contribution Structure

RETIREE MONTHLY CONTRIBUTION STRUCTURE

The rates are per person per month. The plan that covers a retiree or surviving spouse also applies to enrolled dependents. Rates apply to those who retired after July 1, 1987, and their enrolled eligible dependents.

2004 Retiree Rate Structure (Effective January 1, 2004)

RETIREES / SURVIVING SPOUSES AND DEPENDENTS		
UNDER AGE 65		
UnitedHealthcare - PPO	HMO Group Health Cooperative	"Options" Group Health Cooperative
\$157.00 Per Person/Month	\$97.00 Per Person/Month	\$101.00 Per Person/Month
RETIREES / SURVIVING SPOUSES AND DEPENDENTS		
AGE 65 OR OLDER		
UnitedHealthcare - PPO	HMO Group Health Cooperative	"Options" Group Health Cooperative
<u>Retirees after 07/01/87</u> - \$76.00 Per Person/Month <u>Retirees on or prior to 07/01/87</u> - \$36.00 Per Person/Month	\$66.00 Per Person/Month	\$62.00 Per Person/Month

2005 Retiree Rate Structure (Effective January 1, 2005)

RETIREES / SURVIVING SPOUSES AND DEPENDENTS		
UNDER AGE 65		
UnitedHealthcare - PPO	HMO Group Health Cooperative	"Options" Group Health Cooperative
\$176.00 Per Person/Month	\$106.00 Per Person/Month	\$107.00 Per Person/Month
RETIREES / SURVIVING SPOUSES AND DEPENDENTS		
AGE 65 OR OLDER		
UnitedHealthcare - PPO	HMO Group Health Cooperative	"Options" Group Health Cooperative
<u>Retirees after 07/01/87</u> - \$85.00 Per Person/Month <u>Retirees on or prior to 07/01/87</u> - \$45.00 Per Person/Month	\$72.00 Per Person/Month	\$65.00 Per Person/Month

*Group Health Cooperative plans are available only to retirees residing in Group Health Service areas. Contact Group Health Cooperative at (509) 783-3484 for more information.