RETIREE MONTHLY INSURANCE RATES (12 PAYS)

CAREFIRST BLUE CROSS BLUE SHIELD

BLUECHOICE (HMO)

PLAN	FULL MONTHLY PREMIUM	BOARD PAYS	RETIREE PAYS
Individual (Self)	\$955.18	\$716.38	\$238.80
Self/Spouse	2,474.74	716.38	1,758.36
Self/Child	1,726.69	716.38	1,010.31
Family - Self/Children	2,740.58	716.38	2,024.20
Family - Self/Spouse/Child(ren)	2,740.58	716.38	2,024.20
Individual (Dependent Under 65)	955.18	0.00	955.18
Supplemental (Retiree Over 65)	572.54	429.40	143.14
Supplemental (Dependent Over 65)	572.54	0.00	572.54

BLUECHOICE ADVANTAGE (BCA)

PLAN	FULL MONTHLY PREMIUM	BOARD PAYS	EMPLOYEE PAYS
Individual (Self)	\$1,076.72	\$807.54	\$269.18
Self/Spouse	2,789.65	807.54	1,982.11
Self/Child	1,946.72	807.54	1,139.18
Family - Self/Children	3,089.39	807.54	2,281.85

Family - Self/Spouse/Child(ren)	3,089.39	807.54	2,281.85
Individual (Dependent Under 65)	1,076.72	0.00	1,076.72
Supplemental (Retiree Over 65)	611.39	458.54	152.85
Supplemental (Dependent Over 65)	611.39	0.00	611.39

TRADITIONAL PLAN

PLAN	FULL MONTHLY PREMIUM	BOARD PAYS	EMPLOYEE PAYS
Individual (Self)	\$1,244.59	\$933.44	\$311.15
Self/Spouse	3,243.72	933.44	2,310.28
Self/Child	2,290.40	933.44	1,356.96
Family - Self/Children	3,586.55	933.44	2,653.11
Family - Self/Spouse/Child(ren)	3,586.55	933.44	2,653.11
Individual (Dependent Under 65)	1, 244.59	0.00	1, 244.59
Supplemental (Retiree Over 65)	661.58	496.18	165.40
Supplemental (Dependent Over 65)	661.58	0.00	661.58

DENTAL

PLAN	FULL MONTHLY PREMIUM	BOARD PAYS	EMPLOYEE PAYS
Individual (Self)	\$42.41	\$31.81	\$10.60

Self/Spouse	84.80	31.81	52.99
Self/Child	63.60	31.81	31.79
Family - Self/Children	110.22	31.81	78.41
Family - Self/Spouse/Child(ren)	110.22	31.81	78.41
Individual (Retiree's Dependent)	42.41	0.00	42.41

VISION

PLAN	FULL MONTHLY PREMIUM	BOARD PAYS	EMPLOYEE PAYS
Individual (Self)	\$9.13	\$6.85	\$2.28
Self/Spouse	18.31	6.85	11.46
Self/Child	13.73	6.85	6.88
Family - Self/Children	23.75	6.85	16.90
Family - Self/Spouse/Child(ren)	23.75	6.85	16.90
Individual (Retiree's Dependent)	9.13	0.00	9.13

The rates above are the most widely used rates for our retirees. However, some retirees are paying insurance premiums at different rates based on their negotiated agreements. If your percentage of subsidy is **NOT** 75%, please contact Bridget Scott at scottb@calvertnet.k12.md.us, and she will see that you receive the premium rate sheet for your subsidy rate level.

Effective 07/01/2025