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JANUARY 1, 2027
CITY SCHOOL DISTRICT HEALTH INSURANCE RATES (Per Month)
FOR RETIREES' GROUP (ASAR/RAP/BENTE) PAY ACTIVE MONTHLY RATE

RETIREE

Insurance Plan	Over Age 65		Under Age 65			
	Single	Family	Single	Two-Person	Family – No Spouse	Family
Traditional Blue Cross/Blue Shield (Basic Only)	No Cost	No Cost	NOT AVAILABLE			
Retiree+ Enhanced EPO	$962.18	Not Available	NOT AVAILABLE			
Enhanced EPO	Not Available	Not Available	$ 193.16	$ 448.59	$ 486.92	$ 515.77
Core EPO	Not Available	Not Available	$ 59.88	$ 139.06	$ 150.94	$ 159.89
Simply Blue Plus HD EPO (ASAR ONLY)	Not Available	Not Available	$ 164.03	$ 380.93	$ 413.48	$ 437.97
Preferred Gold Buy Up	$ 378.28	Not Available	NOT AVAILABLE			
Preferred Gold Standard	$ 200.00	Not Available	NOT AVAILABLE			
Medicare Blue Choice	$ 202.80	Not Available	NOT AVAILABLE			
Dental (exempt and SEG)			$ 8.79	N/A	N/A	$ 19.12

SURVIVORS

Insurance Plan	Over Age 65		Under Age 65			
	Single	Family	Single	Two-Person	Family – No Spouse	Family
Traditional Basic Only	$200.00	Not Available	NOT AVAILABLE			
Retiree+ Enhanced PO (Over 65) Enhanced (Under 65)	$1,162.18	Not Available	$ 1,287.74	$ 2,990.61	$ 3,246.12	Not Available
Core (Under 65)	Not Available	Not Available	$ 1,197.61	$ 2,781.26	$ 3,018.89	Not Available
Preferred Gold Buy Up	$578.28	Not Available	NOT AVAILABLE			
Preferred Gold Standard	$400.00	Not Available	NOT AVAILABLE			
Medicare Blue Choice	$402.80	Not Available	NOT AVAILABLE			