



County of Marin

Retiree Medical Benefits

Effective January 1, 2024

Marin County Employees' Retirement Association
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Important Note:

This booklet provides general information about the post-retirement medical benefits available to retirees of the County of Marin. Eligibility and enrollment for retiree medical are handled by the Marin County Employees' Retirement Association (MCERA) in accordance with the rules established by the County. If there is any inconsistency between this document and County of Marin policies, MCERA policies, and/or healthcare provider coverage summaries, the policies and coverage summaries will govern.

General Information

All County of Marin employees are eligible to remain on their active medical and dental insurance plans going into retirement. In addition, if you meet certain requirements, you may also be eligible for a medical subsidy through a Benefit Plan to help you pay your monthly insurance premiums. **Eligibility requirements and subsidy levels for each Benefit Plan are explained starting on page 5 of this booklet.**

Medical Insurance

At retirement, you are eligible to remain on the plan you have as an active employee. When you are Medicare-eligible you are required to enroll in Medicare and transfer to the Medicare Advantage plan applicable to your situation.

The retiree medical insurance plans are the same plans offered by the County for active employees — Kaiser Low, Kaiser Silver, Teamsters Local 856 Anthem Blue Cross, and Western Health Advantage. In addition, Kaiser Senior Advantage, Western Health Medicare Advantage and UnitedHealthcare Group Medicare Advantage plans are available for Medicare-enrolled retirees. Premiums for these plans are eligible to be covered by the Benefit Plan subsidy you may receive from the County.

If you would like a different medical insurance plan in retirement than what you have as an active employee, you must change plans during open enrollment and wait until your new coverage is effective January 1 prior to retiring. However, keep in mind that if you entered MCERA membership on or after January 1, 2008, Benefit Plan 4 requires five years of continuous coverage in the same medical plan. Changing plans immediately before retirement in this situation would make you ineligible to receive the Benefit Plan 4 subsidy.

There is no open enrollment after retirement. If you drop your medical plan you may not reenroll.

Dental Insurance

The retiree dental insurance plan through Delta Dental is the same plan offered by the County for active employees and is eligible to be covered by the Benefit Plan subsidy you may receive from the County. To remain on the Delta Dental plan in retirement you must have dental coverage in place as an active employee.

There is no open enrollment after retirement. If you drop your dental plan you may not reenroll.

Vision Insurance

The State Association of County Retirement Systems (SACRS), of which MCERA is a member, sponsors a voluntary vision insurance plan for all retirees and beneficiaries through VSP Vision Care.

The VSP Vision Care plan is separate from any plans that may be offered by your former employer. If you elect vision coverage through VSP as a retiree, you are responsible for all VSP Vision Care premiums as they are not covered by the Benefit Plan subsidy you may receive.

Open enrollment is available for VSP after you retire.

Life Insurance

If you have 20 or more years of County service, and coverage was in force for five years prior to retirement, the County will pay the premiums for life insurance for you as follows:

- Basic life insurance payment of \$10,000, or
- Supplemental insurance with a declining face amount for eight years.

MCERA staff can answer general questions related to life insurance. For more specific information please contact the County of Marin.

Continuous Coverage

Continuous health coverage is required for you to be eligible to remain on your medical plan in retirement. Depending on your termination date, you may need to apply for COBRA insurance to fill a coverage gap in order to enroll in the retiree medical plans. Contact Human Resources regarding COBRA.

If you entered MCERA membership on or after January 1, 2008, you must meet additional continuous coverage requirements in order to receive a retiree medical subsidy through Benefit Plan 4.

Effective Date of Benefits

The effective date of your retiree medical coverage is determined by your plan provider and the date your active coverage ends. Your active coverage is generally effective for two weeks following the end date of your last pay period, assuming you have paid the full premiums for that pay period. If you are planning to retire in 2024, refer to the Active Health Coverage Calendar on page 12 to see when your active health coverage will end based on your termination and retirement dates.

Kaiser HMO

If Your Active Coverage Ends After the 15th of the Month

Your retiree coverage is effective the day after your active coverage ends. You do not need to take any additional action to ensure continuous coverage.

If Your Active Coverage Ends Before the 15th of the Month

Your retiree coverage is effective the first day of the following month, and you must sign up for COBRA for the remainder of the current month to avoid a coverage gap.

Anthem Blue Cross PPO, Western Health Advantage HMO, UnitedHealthcare Group Medicare Advantage PPO

Your retiree coverage is effective on the first day of the month following your retirement date. No additional action is necessary if your active coverage continues through the end of the month. You must sign up for COBRA only if your active coverage will end prior to the last day of the month.

Payment of Premiums

Healthcare premiums will be deducted from your monthly retirement benefit payments beginning with the first payment you receive after you retire. If you receive a subsidy from the County as outlined in the following Benefit Plans, this will appear on your monthly deposit confirmation as "Employer Subsidy." Any amount you owe in addition to the subsidy will appear as "Net Medical Care Cost."

Dependent Coverage

You are eligible to maintain insurance coverage for dependents enrolled on your active employee insurance plans at the time of retirement. After retirement, you may only add dependents with a qualifying life event such as loss of other coverage, marriage, birth or adoption. Generally, children may remain on your insurance plans until age 26. Please contact us about dependent coverage if you have a disabled adult child. If you drop any dependent from your insurance plan you may not reenroll them at a later date.

Most Benefit Plan subsidies apply only to retiree premiums, and the retiree is responsible for 100% of the cost of dependent insurance. However, if you have 30 or more years of County service and are eligible for a subsidy through Benefit Plan 3, you may receive a second subsidy to help pay for your spouse's/partner's medical and dental premiums.

In some cases, you and your dependents may be on different medical plans. For example, if you are on Anthem Blue Cross and cover your younger spouse, at age 65 with Medicare enrollment, you will transition to the UnitedHealthcare Group Medicare Advantage plan and your spouse will remain on Anthem until they also turn 65.

Coverage Areas

Kaiser HMO

Kaiser's service areas are based on zip code within the following regions: Northern California, Southern California, Colorado, Hawaii and Northwest (Oregon & Washington).

Coverage and premiums in non-California plans may be different, and coverage areas may be different for pre-age 65 and post-age 65 Senior Advantage plans. We recommend checking with the plan provider before relocating to determine if there will be changes to your healthcare coverage. See MCERA's Kaiser Permanente Premiums & Service Areas booklet for more information.

Anthem Blue Cross PPO

This plan offers coverage within the United States.

Western Health Advantage HMO

Western Health's service areas are based on zip code within the following California counties: Colusa, El Dorado, Humboldt, Marin, Napa, Placer, Sacramento, Solano, Sonoma, and Yolo.

UnitedHealthcare Group Medicare Advantage PPO

This plan offers coverage within the United States.

If You Move

If you move outside of your primary Kaiser or Western Health coverage area you may need to enroll in another plan to continue to receive your Benefit Plan subsidy. If you subsequently move back into your original Kaiser or Western Health coverage area you are allowed to return to your original plan.

Coverage and premiums in non-California plans may be different, and coverage areas may be different for pre-age 65 and post-age 65 Senior Advantage plans. We recommend checking with the plan provider before relocating to determine if there will be changes to your healthcare coverage. See MCERA's Kaiser Permanente Premiums & Service Areas booklet for more information.

You must keep MCERA informed of your address. However, updating your address with MCERA does not update your address with your healthcare providers. You must file address change requests with your healthcare providers separately.

Medicare

The County of Marin and the medical providers require Medicare enrollment for all retirees and dependents if they are over 65. If you continue to work full-time beyond age 65 you will not need to enroll in Medicare until three months prior to your retirement date.

When to Enroll

If You Are Over 65 at the Time of Retirement

If you are over age 65 at retirement your Medicare benefits must be effective on or prior to your retirement date. There are premium penalties if your benefits are effective after retirement, so we recommend beginning the enrollment process no later than three months before you plan to retire.

MCERA must receive one of the following with your retirement application:

- Medicare enrollment card, or
- Letter from Medicare confirming enrollment

If You Turn 65 After Retirement

If you are already retired when you turn 65 your Medicare benefits must be effective on your 65th birthday. We recommend beginning the enrollment process no later than three months before you turn 65.

If You Do Not Enroll When Eligible

The consequences for lack of Medicare enrollment when eligible could be loss of coverage and Benefit Plan subsidy. If your retiree medical coverage is terminated there is no opportunity to reenroll at a later date.

How to Enroll

Contact Medicare to apply for Medicare Parts A and B. When you apply for Parts A and B you automatically receive Part D, the prescription drug program. You should assign your Part D benefits to your insurance carrier (Kaiser, UnitedHealthcare, or Western Health). You may only assign Medicare benefits to one insurance plan at a time, and your County of Marin retiree coverage will be cancelled if you opt to assign benefits to a non-County insurance provider.

If you are on Kaiser or Western Health you will also need to enroll in your provider's Medicare Advantage plan. If you are on Anthem Blue Cross you will transfer to the UnitedHealthcare Group Medicare Advantage plan. If you are over 65 at the time of retirement MCERA will provide the medical enrollment forms with your retirement application. If you turn 65 after retirement MCERA will mail you the enrollment forms prior to your 65th birthday.

Health Coverage and Premiums

Your Medicare coverage will combine with your current coverage for a single comprehensive health plan and in most cases your monthly premium will decrease. Medicare will become your primary payor with Kaiser, Western Health or UnitedHealthcare becoming the secondary payor. You are responsible for any payments owed after what Medicare and your health plan pay.

Coverage summaries for all plans are available from MCERA upon request. You may also contact MCERA or your health plan provider for more information specific to your individual situation.

Medicare Premium Reimbursement

If you are eligible for a Benefit Plan subsidy the County will reimburse your base Medicare Part B premium as part of that subsidy. Some retirees pay a higher income-related Medicare Part B premium, but this higher amount is not reimbursed by the County.

The date of your enrollment in Medicare and/or Social Security benefits determines your base premium for Medicare Part B:

- Members who enroll in Medicare Part B on or after January 1, 2016, or who are not receiving Social Security benefits regardless of when they enroll in Medicare, have a base premium of \$174.70.
- Members who were enrolled in Medicare Part B on or before December 31, 2015 and were receiving Social Security benefits as of that date have a lower base premium that varies by individual.

You will see the reimbursement as a line item on your monthly deposit confirmation. While your actual Medicare Part B premium may be different, the County only reimburses up to the base premium applicable to your situation.

Medicare Premium Rules for Higher-Income Retirees

Individuals with a modified adjusted gross income (MAGI) of \$103,000 or more, and married couples with a MAGI of \$206,000 or more, pay higher premiums for Part B. Medicare calls the additional amount the income-related monthly adjustment amount, or IRMAA.

This higher IRMAA premium is not reimbursed by the County. If you pay a higher Medicare Part B premium due to the IRMAA you will only be reimbursed up to the base Medicare Part B amount.

Information on how the IRMAA is determined, what to do if your income has gone down, and charts outlining the income levels and premiums for single and married tax filers is in the Social Security brochure *Medicare Premiums: Rules for Higher-Income Beneficiaries*.

Benefit Plans

County of Marin retirees who meet certain eligibility requirements may receive a monthly subsidy through a Benefit Plan to help pay for their medical and dental premiums. Your Benefit Plan subsidy can only be used toward payment of premiums for County-sponsored insurance plans.

Please note that reciprocal service earned with an employer other than the County of Marin does not

count toward meeting the eligibility requirements for these Benefit Plans.

If you are not eligible for one of the Benefit Plans described in this booklet, as long as you have continuous coverage you may still remain on the same insurance plan(s) as a retiree that you had as an active employee. In this case, all medical premiums are your responsibility and will not be reimbursed or subsidized by the County.

Benefit Plan 1

Eligibility Requirements	<ul style="list-style-type: none"> • MCERA membership date on or before 9/30/1987 • 5+ years of County service • Continuous medical coverage • 1+ year of continuous dental coverage
Retiree Premiums	<p>Medical and dental premiums paid by the County.</p> <p>Base Medicare Part B premium for the retiree is reimbursed by the County upon proof of enrollment. Reimbursement is paid in your monthly retirement benefit payment. The retiree is responsible for any difference over this amount.</p>
Dependent Premiums	All dependent premiums are paid by the retiree.
Additional Notes	Members eligible for Benefit Plan 1 may elect Benefit Plan 3 at retirement, which may be more beneficial if you have at least 30 years of service and are married/partnered.

Benefit Plan 2

Eligibility Requirements	<ul style="list-style-type: none"> • MCERA membership date on or before 9/30/1993 • 5+ years of County service • Continuous medical coverage • 1+ year of continuous dental coverage
Retiree Premiums	The County pays a maximum of \$2,275 per year (\$189.58 per month) to subsidize a portion (or all) of the cost of the retiree's medical, dental and base Medicare Part B premium. The retiree is responsible for any difference over this amount. There is no cash back if the subsidy is not used completely, nor can it be applied to the cost of dependent coverage.
Dependent Premiums	All dependent premiums are paid by the retiree.
Additional Notes	Members eligible for Benefit Plan 2 may elect Benefit Plan 3 at retirement, which may be more beneficial if you have over 5 years of service.

Benefit Plan 3

Eligibility Requirements	<ul style="list-style-type: none"> • MCERA membership date on or before 12/31/2007 • 5+ years of County service • Continuous medical coverage • 1+ year of continuous dental coverage
Retiree Premiums	<p>A formula is used to calculate the maximum annual subsidy provided to cover a portion (or all) of the retiree's medical, dental and base Medicare Part B premiums. The maximum annual subsidy is determined by multiplying your years of County service (up to a maximum of 20 years) by an allocation factor. The allocation factor is set annually by the Board of Supervisors and may go up or down both before and after you retire. The 2024 allocation factor is \$455.93 per year of service for a maximum annual subsidy of \$9,118 (\$759.83 per month). The retiree is responsible for any difference over this amount. There is no cash back if the subsidy is not used completely, nor can it be applied to the cost of dependent coverage.</p>
Dependent Premiums	<p>If the retiree has less than 30 years of County service, the retiree is responsible for all dependent premiums.</p> <p>If the retiree has more than 30 years of County service they are eligible for a second subsidy, equal to their own, to help pay for their spouse's/partner's medical, dental and base Medicare Part B premiums. Only your spouse/partner at the time of retirement is eligible for the second subsidy. If the retiree marries after retirement and adds the new spouse/partner to their insurance plans, the retiree is responsible for 100% of the dependent premiums, even if they retired with over 30 years of service and elected Benefit Plan 3.</p>
Subsidy Calculation Samples	<p>See pages 8 and 9 in this booklet for examples of how the Benefit Plan 3 subsidy may impact the retiree's cost for health insurance in calendar year 2024. Benefit Plan subsidies do not cover the VSP Vision Care plan, so that premium is not included in the examples.</p>

Benefit Plan 4

Eligibility Requirements	<ul style="list-style-type: none"> • MCERA membership date on or after 1/1/2008 • 5+ years of County service • 5+ years of continuous medical coverage in the same medical plan • 5+ years of continuous dental coverage
Retiree Premiums	<p>A formula is used to calculate the maximum annual subsidy provided to cover a portion (or all) of the retiree's medical, dental and base Medicare Part B premiums. The maximum annual subsidy is determined by multiplying your years of County service (up to a maximum of 20 years) by \$150, for a maximum annual subsidy of \$3,000 (\$250 per month). The retiree is responsible for any difference over this amount. There is no cash back if the subsidy is not used completely, nor can it be applied to the cost of dependent coverage.</p>
Dependent Premiums	<p>All dependent premiums are paid by the retiree.</p>
Subsidy Calculation Samples	<p>See pages 10 and 11 in this booklet for examples of how the Benefit Plan 4 subsidy may impact the retiree's cost for health insurance in calendar year 2024. Benefit Plan subsidies do not cover the VSP Vision Care plan, so that premium is not included in the examples.</p>

Benefit Plan 3

Sample Subsidy and Monthly Deduction Calculations for Under Age 65 Plans in 2024

In Benefit Plan 3, your maximum annual subsidy is determined by multiplying your years of service (up to a maximum of 20 years) by an allocation factor. The allocation factor is set annually by the Board of Supervisors.

The 2024 allocation factor is \$455.93 per year of service, for a maximum annual amount of \$9,118.

The samples on this page show how much a retiree would owe for monthly medical premiums in 2024 if they retired with 10 years of service or 20 years of service. Your actual County service credit at retirement will be used in the calculation.

To determine your own monthly subsidy in 2024, multiply your years of service credit by the current allocation factor (up to the maximum of 20 years), then divide by 12.

10 Years of Service

Subsidy Calculation

2024 Allocation factor	\$455.93
Years of service	x 10.00
Max. annual subsidy	\$4,559.30
Max. monthly subsidy	\$379.94

Kaiser Silver - Under Age 65

Kaiser Silver premium	\$945.52
Delta Dental premium	+ \$52.46
Total premium cost	\$997.98
Max. employer subsidy	- \$379.94
Due from retiree monthly	\$618.04

Kaiser Low - Under Age 65

Kaiser Low premium	\$1,027.87
Delta Dental premium	+ \$52.46
Total premium cost	\$1,080.33
Max. employer subsidy	- \$379.94
Due from retiree monthly	\$700.39

Anthem Blue Cross - Under Age 65

Blue Cross premium	\$944.08
Delta Dental premium	+ \$52.46
Total premium cost	\$996.54
Max. employer subsidy	- \$379.94
Due from retiree monthly	\$616.60

20 Years of Service

Subsidy Calculation

2024 Allocation factor	\$455.93
Years of service	x 20.00
Max. annual subsidy	\$9,118.00
Max. monthly subsidy	\$759.83

Kaiser Silver - Under Age 65

Kaiser Silver premium	\$945.52
Delta Dental premium	+ \$52.46
Total premium cost	\$997.98
Max. employer subsidy	- \$759.83
Due from retiree monthly	\$238.15

Kaiser Low - Under Age 65

Kaiser Low premium	\$1,027.87
Delta Dental premium	+ \$52.46
Total premium cost	\$1,080.33
Max. employer subsidy	- \$759.83
Due from retiree monthly	\$320.50

Anthem Blue Cross - Under Age 65

Blue Cross premium	\$944.08
Delta Dental premium	+ \$52.46
Total premium cost	\$996.54
Max. employer subsidy	- \$759.83
Due from retiree monthly	\$236.71

Benefit Plan 3

Sample Subsidy and Monthly Deduction Calculations for Medicare Plans (Over Age 65) in 2024

The samples on this page show how much a retiree over age 65 would owe for monthly medical premiums in 2024 if they retired with 10 years of service or 20 years of service. Your actual County service credit at retirement will be used in the calculation.

To determine your own monthly subsidy in 2024, multiply your years of service credit by the current allocation factor (up to the maximum of 20 years), then divide by 12.

Every month, you will be reimbursed up to the base Medicare Part B premium (\$174.70 for 2024). This will appear on your monthly deposit confirmation as a separate line item showing an addition of \$174.70. The amount of reimbursement is subtracted from your maximum subsidy and the remainder is used to help pay your medical and dental premiums.

You must pay your Medicare Part B premium directly to Medicare. MCERA is unable to deduct Medicare premiums from your monthly retirement benefit payment.

10 Years of Service

Subsidy Calculation on Page 8

Max. monthly subsidy	\$379.94
Medicare reimbursement	- \$174.70
Remaining subsidy	\$205.24

Kaiser Silver with Medicare (Senior Advantage)

Kaiser Silver premium	\$279.59
Delta Dental premium	+ \$52.46
Total premium cost	\$332.05
Remaining subsidy	- \$205.24
Medicare reimbursement	- \$174.70
Due from retiree monthly	\$0.00

Kaiser Low with Medicare (Senior Advantage)

Kaiser Low premium	\$353.24
Delta Dental premium	+ \$52.46
Total premium cost	\$405.70
Remaining subsidy	- \$205.24
Medicare reimbursement	- \$174.70
Due from retiree monthly	\$25.76

UnitedHealthcare with Medicare (Senior Advantage)

UnitedHealthcare premium	\$418.60
Delta Dental premium	+ \$52.46
Total premium cost	\$471.06
Remaining subsidy	- \$205.24
Medicare reimbursement	- \$174.70
Due from retiree monthly	\$91.12

20 Years of Service

Subsidy Calculation on Page 8

Max. monthly subsidy	\$759.83
Medicare reimbursement	- \$174.70
Remaining subsidy	\$585.13

Kaiser Silver with Medicare (Senior Advantage)

Kaiser Silver premium	\$279.59
Delta Dental premium	+ \$52.46
Total premium cost	\$332.05
Remaining subsidy	- \$585.13
Medicare reimbursement	- \$174.70
Due from retiree monthly	\$0.00

Kaiser Low with Medicare (Senior Advantage)

Kaiser Low premium	\$353.24
Delta Dental premium	+ \$52.46
Total premium cost	\$405.70
Remaining subsidy	- \$585.13
Medicare reimbursement	- \$174.70
Due from retiree monthly	\$0.00

UnitedHealthcare with Medicare (Senior Advantage)

UnitedHealthcare premium	\$418.60
Delta Dental premium	+ \$52.46
Total premium cost	\$471.06
Remaining subsidy	- \$585.13
Medicare reimbursement	- \$174.70
Due from retiree monthly	\$0.00

Benefit Plan 4

Sample Subsidy and Monthly Deduction Calculations for Under Age 65 Plans in 2024

In Benefit Plan 4, your maximum annual subsidy is determined by multiplying your years of service (up to a maximum of 20 years) by \$150.

The maximum subsidy is \$3,000 per year, or \$250 per month.

The samples on this page show how much a retiree would owe for monthly medical premiums in 2024 if they retired with 10 years of service or 20 years of service. Your actual County service credit at retirement will be used in the calculation.

To determine your own monthly subsidy, multiply your years of service credit (up to the maximum of 20 years) by \$150, then divide by 12.

10 Years of Service

Subsidy Calculation

Amount per year of service	\$150.00
Years of service	x 10.00
Max. annual subsidy	\$1,500.00
Max. monthly subsidy	\$125.00

Kaiser Silver - Under Age 65

Kaiser Silver premium	\$945.52
Delta Dental premium	+ \$52.46
Total premium cost	\$997.98
Max. employer subsidy	- \$125.00
Due from retiree monthly	\$872.98

Kaiser Low - Under Age 65

Kaiser Low premium	\$1,027.87
Delta Dental premium	+ \$52.46
Total premium cost	\$1,080.33
Max. employer subsidy	- \$125.00
Due from retiree monthly	\$955.33

Anthem Blue Cross - Under Age 65

Blue Cross premium	\$944.08
Delta Dental premium	+ \$52.46
Total premium cost	\$996.54
Max. employer subsidy	- \$125.00
Due from retiree monthly	\$871.54

20 Years of Service

Subsidy Calculation

Amount per year of service	\$150.00
Years of service	x 20.00
Max. annual subsidy	\$3,000.00
Max. monthly subsidy	\$250.00

Kaiser Silver - Under Age 65

Kaiser Silver premium	\$945.52
Delta Dental premium	+ \$52.46
Total premium cost	\$997.98
Max. employer subsidy	- \$250.00
Due from retiree monthly	\$747.98

Kaiser Low - Under Age 65

Kaiser Low premium	\$1,027.87
Delta Dental premium	+ \$52.46
Total premium cost	\$1,080.33
Max. employer subsidy	- \$250.00
Due from retiree monthly	\$830.33

Anthem Blue Cross - Under Age 65

Blue Cross premium	\$944.08
Delta Dental premium	+ \$52.46
Total premium cost	\$996.54
Max. employer subsidy	- \$250.00
Due from retiree monthly	\$746.54

Benefit Plan 4

Sample Subsidy and Monthly Deduction Calculations for Medicare Plans (Over Age 65) in 2024

The samples on this page show how much a retiree over age 65 would owe for monthly medical premiums in 2024 if they retired with 10 years of service or 20 years of service. Your actual County service credit at retirement will be used in the calculation.

To determine your own monthly subsidy, multiply your years of service credit (up to the maximum of 20 years) by the allocation factor of \$150 and divide by 12.

If your subsidy is greater than the base Medicare Part B premium (\$174.70 for 2024) you will be reimbursed up to the base Medicare Part B premium amount. This will appear on your monthly deposit confirmation as a separate line item showing an addition of \$174.70. The amount of reimbursement is subtracted from your maximum subsidy and the remainder is used to help pay your medical and dental premiums.

You must pay your Medicare Part B premium directly to Medicare. MCERA is unable to deduct Medicare premiums from your monthly retirement benefit payment.

10 Years of Service

Subsidy Calculation on Page 10

Max. monthly subsidy	\$125.00
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Note: The base Medicare premium is less than the total subsidy so a reimbursement is not applied.

Kaiser Silver with Medicare (Senior Advantage)

Kaiser Silver premium	\$279.59
Delta Dental premium	+ \$52.46
Total premium cost	\$332.05
Max. employer subsidy	- \$125.00
Due from retiree monthly	\$207.05

Kaiser Low with Medicare (Senior Advantage)

Kaiser Low premium	\$353.24
Delta Dental premium	+ \$52.46
Total premium cost	\$405.70
Max. employer subsidy	- \$125.00
Due from retiree monthly	\$280.70

UnitedHealthcare with Medicare

UnitedHealthcare Premium	\$418.60
Delta Dental premium	+ \$52.46
Total premium cost	\$471.06
Max. employer subsidy	- \$125.00
Due from retiree monthly	\$346.06

20 Years of Service

Subsidy Calculation on Page 10

Max. monthly subsidy	\$250.00
Medicare reimbursement	- \$174.70
Remaining subsidy	\$75.30

Kaiser Silver with Medicare (Senior Advantage)

Kaiser Silver premium	\$279.59
Delta Dental premium	+ \$52.46
Total premium cost	\$332.05
Remaining subsidy	- \$75.30
Medicare reimbursement	- \$174.70
Due from retiree monthly	\$82.05

Kaiser Low with Medicare (Senior Advantage)

Kaiser Low premium	\$353.24
Delta Dental premium	+ \$52.46
Total premium cost	\$405.70
Remaining subsidy	- \$75.30
Medicare reimbursement	- \$174.70
Due from retiree monthly	\$155.70

UnitedHealthcare with Medicare (Senior Advantage)

UnitedHealthcare premium	\$418.60
Delta Dental premium	+ \$52.46
Total premium cost	\$471.06
Remaining subsidy	- \$75.30
Medicare reimbursement	- \$174.70
Due from retiree monthly	\$221.06

Monthly Premiums for County-sponsored Plans in 2024

KAISER HMO		Low (\$10 copay)		Silver (\$25 copay)	
Non-Medicare Retirees		2023	2024	2023	2024
One Person		\$903.81	\$1,027.87	\$816.48	\$945.52
Two Persons		\$1,807.62	\$2,055.73	\$1,632.96	\$1,891.04
Family (All Under 65)		\$2,404.14	\$2,734.12	\$2,171.83	\$2,515.08
Medicare Retirees		2023	2024	2023	2024
One Person Over 65 with Senior Advantage and Parts A & B		\$338.89	\$353.24	\$246.28	\$279.59
Senior Advantage Enrollment with Part B Only		\$648.89	\$663.24	\$556.28	\$589.59

WESTERN HEALTH ADVANTAGE HMO		\$15 Copay		\$25 Copay	
Non-Medicare Retirees		2023	2024	2023	2024
One Person		\$758.54	\$815.12	\$713.04	\$766.23
Two Persons		\$1,517.10	\$1,630.26	\$1,426.07	\$1,532.44
Family (All Under 65)		\$2,017.73	\$2,168.24	\$1,896.67	\$2,038.15
		\$20 Copay			
Medicare Retirees		2023	2024		
Per Person		\$335.00	\$350.08		

TEAMSTERS ANTHEM BLUE CROSS PPO		
Non-Medicare Retirees	2023	2024
One Person	\$899.12	\$944.08
Two Persons	\$1,804.51	\$1,894.74
Family (All Under 65)	\$2,523.81	\$2,650.00

UNITEDHEALTHCARE GROUP MEDICARE ADVANTAGE PPO		
Medicare Retirees	2023	2024
Per Person	\$402.50	\$418.60

DELTA DENTAL		
All Retirees	2023	2024
One Person	\$54.09	\$52.46
Two Persons	\$100.73	\$97.70
Family	\$157.46	\$152.72



The rates above do not apply to retirees from City of San Rafael or Novato Fire Protection District. Retirees from these agencies should contact their employer for information on health insurance.

VSP VISION CARE			
All Retirees, All Employers	2023	2024	The VSP Vision Care plan is available to retirees of all employers. Premiums are <u>not</u> covered by your benefit plan subsidy. The retiree is responsible for <u>all</u> VSP Vision Care premiums.
One Person	\$10.51	\$10.51	
Two Persons	\$20.53	\$20.53	
Family	\$24.05	\$24.05	

Active Health Coverage Calendar

The effective date of your retiree medical coverage is determined by your medical care provider and the date your active coverage ends. If you are planning to retire in 2024, this calendar can help you determine if your termination and retirement dates will create a gap in your healthcare coverage.

The benefits coverage periods listed assume that full premiums are deducted for the corresponding work dates (pay periods).

See page 2 for more information on the effective date of retiree healthcare benefits.

Pay Period	Work Dates	Pay Date	Benefits Coverage Period
1	December 10, 2023–December 23, 2023	January 5, 2024	December 24, 2023–January 6, 2024
2	December 24, 2023–January 6, 2024	January 19, 2024	January 7, 2024–January 20, 2024
3	January 7, 2024–January 20, 2024	February 2, 2024	January 21, 2024–February 3, 2024
4	January 21, 2024–February 3, 2024	February 16, 2024	February 4, 2024–February 17, 2024
5	February 4, 2024–February 17, 2024	March 1, 2024	February 18, 2024–March 2, 2024
6	February 18, 2024–March 2, 2024	March 15, 2024	March 3, 2024–March 16, 2024
7	March 3, 2024–March 16, 2024	March 29, 2024	March 17, 2024–March 30, 2024
8	March 17, 2024–March 30, 2024	April 12, 2024	March 31, 2024–April 13, 2024
9	March 31, 2024–April 13, 2024	April 26, 2024	April 14, 2024–April 27, 2024
10	April 14, 2024–April 27, 2024	May 10, 2024	April 28, 2024–May 11, 2024
11	April 28, 2024–May 11, 2024	May 24, 2024	May 12, 2024–May 25, 2024
12	May 12, 2024–May 25, 2024	June 7, 2024	May 26, 2024–June 8, 2024
13	May 26, 2024–June 8, 2024	June 21, 2024	June 9, 2024–June 22, 2024
14	June 9, 2024–June 22, 2024	July 5, 2024	June 23, 2024–July 6, 2024
15	June 23, 2024–July 6, 2024	July 19, 2024	July 7, 2024–July 20, 2024
16	July 7, 2024–July 20, 2024	August 2, 2024	July 21, 2024–August 3, 2024
17	July 21, 2024–August 3, 2024	August 16, 2024	August 4, 2024–August 17, 2024
18	August 4, 2024–August 17, 2024	August 30, 2024	August 18, 2024–August 31, 2024
19	August 18, 2024–August 31, 2024	September 13, 2024	September 1, 2024–September 14, 2024
20	September 1, 2024–September 14, 2024	September 27, 2024	September 15, 2024–September 28, 2024
21	September 15, 2024–September 28, 2024	October 11, 2024	September 29, 2024–October 12, 2024
22	September 29, 2024–October 12, 2024	October 25, 2024	October 13, 2024–October 26, 2024
23	October 13, 2024–October 26, 2024	November 8, 2024	October 27, 2024–November 9, 2024
24	October 27, 2024–November 9, 2024	November 22, 2024	November 10, 2024–November 23, 2024
25	November 10, 2024–November 23, 2024	December 6, 2024	November 24, 2024–December 7, 2024
26	November 24, 2024–December 7, 2024	December 20, 2024	December 8, 2024–December 21, 2024



2024

Retiree Medical

County of Marin

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