



Retiree Medical Benefits

Marin Superior Court

General Information

This booklet provides general information about the post-retirement medical benefits available to retirees of Marin Superior Court. Eligibility and enrollment for retiree medical are handled by the Marin County Employees' Retirement Association (MCERA) in accordance with the rules established by the Courts.

All Superior Court 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 4 of this booklet.**

Medical Insurance

The retiree medical insurance plans through Kaiser and Anthem Blue Cross are the same plans offered by the Courts for active employees and are eligible to be covered by the Benefit Plan subsidy you may receive from the Courts.

At retirement you are eligible to enroll in the plan you have as an active employee. For example, if you (and your dependents) have the Kaiser Low plan as an active employee, you are eligible to continue the Kaiser Low coverage as a retiree.

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.

There is currently no open enrollment after retirement, and if you drop any plan you may not re-enroll.

Dental Insurance

The retiree dental insurance plan through Delta Dental is the same plan offered by the Courts for active employees and is eligible to be covered by the Benefit Plan subsidy you may receive from the Courts.

To be eligible for retiree dental insurance you must have dental coverage in place as an active employee prior to retirement.

There is currently no open enrollment after retirement, and if you drop the plan you may not re-enroll.

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 Superior Court service, and coverage was in force for five years prior to retirement, the Courts 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 Superior Court Human Resources.

Effective Date of Coverage

The effective date of your retiree medical coverage is the first day of the month after you retire.

Continuous Coverage & COBRA

Your effective date of retirement may create a gap in your medical coverage. Because continuous health coverage is required for you to be eligible for retiree medical benefits, if your active employee coverage ends prior to the effective date of your retiree coverage you must apply for COBRA insurance to fill the gap. COBRA is handled through the Superior Court Human Resources department.

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 Courts 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 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 re-enroll 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 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.

Coverage Areas and Relocation

You must keep MCERA informed of your address. If you fail to notify MCERA of your new address, or falsify a claim, your healthcare coverage may be denied by the carrier.

If you move outside of your primary healthcare provider’s coverage area you may need to enroll in another healthcare plan. For example, if you are a

Kaiser member and move outside of a Kaiser coverage area, you must enroll in the Anthem Blue Cross plan to continue to receive your Benefit Plan subsidy. If you subsequently move back into a Kaiser coverage area you are allowed to return to your original Kaiser 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 plans. We recommend checking with the plan provider before relocating to determine if there will be changes to your healthcare coverage.

Medicare

Most MCERA members have contributed to Medicare and are eligible for Medicare at age 65. If you continue to work full-time beyond age 65, contact your Human Resources department for information regarding Medicare for active employees. If you are not eligible for Medicare, please obtain proof of your non-eligibility (commonly in the form of a letter from Medicare) and submit it to MCERA.

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
- Letter from Medicare confirming enrollment
- Letter from Medicare confirming non-eligibility

A higher premium will be deducted from your retirement benefit payment if we do not have one of these items with your retirement application. The higher premium is a surcharge that is not covered by your Benefit Plan subsidy and is not eligible for reimbursement.

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 are eligible for Medicare and do not enroll, a higher premium will be deducted from your retirement benefit payment. The higher premium is a surcharge that is not covered by your Benefit Plan subsidy and is not eligible for reimbursement.

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 (either Kaiser or Anthem Blue Cross). You may only assign Medicare Part D benefits to one carrier at a time, so if you have dual coverage let MCERA know in advance.

Health Coverage and Premiums

You will also need to enroll in the Kaiser Senior Advantage or Anthem Blue Cross Medicare Advantage plan. If you are over 65 at the time of retirement MCERA will provide the enrollment forms with your retirement application. If you turn 65 after retirement MCERA will mail you the enrollment forms prior to your 65th birthday.

Your Medicare coverage will combine with your current coverage for a single comprehensive health plan. You will retain your current benefits, but your monthly premiums will likely decrease. Medicare will become your primary payor with Kaiser or Blue Cross becoming the secondary payor. You are responsible for any payments owed after what Medicare and your insurance carrier pay.

Please contact 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 Court will reimburse your base Medicare part B premium. The date of your enrollment in Medicare and/or Social Security benefits determines your base premium for Medicare Part B in 2017:

- 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 \$134.
- 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 (\$109 on average).

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 Court only reimburses up to the base premium applicable to your situation.

Medicare Resources

To find out more about Medicare you can do any of the following:

- Visit Medicare's website (www.medicare.gov) to view or download the "Medicare & You" handbook (publication 10050).
- Call Social Security at 1-800-772-1213 for more information about Medicare eligibility and how to sign up. TTY users should call 1-800-325-0778.
- Visit www.medicare.gov, and select "Find Out if You Are Eligible for Medicare and When You Can Enroll."
- Visit www.medicare.gov, and select "Compare Health Plans and Medigap Policies in Your Area" to learn more about Medicare Advantage or other Medicare health plans, as well as Medigap policies.
- Visit www.medicare.gov, and select "Compare Medicare Prescription Drug Plans" to learn more about Medicare drug plans and to compare plans.
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

Benefit Plans

Marin Superior Court 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 Courts-sponsored insurance plans.

Please note that reciprocal service earned with an employer other than the County of Marin or Marin

Superior Court 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 you may remain on the same insurance plan(s) as a retiree that you had as an active employee. In this case, all medical premiums are the responsibility of the retiree and will not be reimbursed or subsidized by the Courts.

Benefit Plan 1

Eligibility Requirements

- MCERA membership date on or before 9/30/1987
- 5+ years of Superior Court service
- Continuous medical coverage
- 1+ year of continuous dental coverage

Retiree Premiums

Medical and dental premiums paid by the Courts.

Base Medicare Part B premium for the retiree is reimbursed by the Courts upon proof of enrollment. Reimbursement is paid in your monthly retirement benefit payment. The retiree is responsible for any difference over this amount.

Dependent Premiums

All dependent premiums 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

- MCERA membership date on or before 9/30/1993
- 5+ years of Superior Court service
- Continuous medical coverage
- 1+ year of continuous dental coverage

Retiree Premiums

The Courts pay 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 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

- MCERA membership date with service as an unrepresented employee or MCMEA member from 10/1/1993 to 12/31/2008, or SEIU 1021 or CFI member from 10/1/1993 to 12/31/2013
- 5+ years of Superior Court service
- Continuous medical coverage
- 1+ year of continuous dental coverage

Retiree Premiums

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 Superior Court service (up to a maximum of 20 years) by an allocation factor. The allocation factor is set annually by the Courts and may go up or down. The 2017 allocation factor is \$442.65 per year of service for a maximum subsidy of \$8,853 for the year (\$737.75 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.

Dependent Premiums

If the retiree has less than 30 years of Superior Court service, the retiree is responsible for all dependent premiums. If the retiree has more than 30 years of Courts 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.

Subsidy Calculation Samples

See pages 6 and 7 in this booklet for examples of how the Benefit Plan 3 subsidy may impact the retiree’s cost for medical and dental insurance in calendar year 2017. Benefit Plan subsidies do not cover the VSP Vision Care plan, so that premium is not included in the examples.

Benefit Plan 4

Eligibility Requirements

- MCERA membership date with service as an unrepresented employee or MCMEA member from 1/1/2009 to the present, or SEIU 1021 or CFI member from 1/1/2014 to the present
- 5+ years of Superior Court service
- 5+ years of continuous medical coverage in the same medical plan
- 5+ years of continuous dental coverage

Retiree Premiums

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 Superior Court service (up to a maximum of 20 years) by \$150, for a maximum annual subsidy of \$3,000 per year (\$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.

Dependent Premiums

All dependent premiums paid by the retiree.

Subsidy Calculation Samples

See pages 8 and 9 in this booklet for examples of how the Benefit Plan 4 subsidy may impact the retiree’s cost for medical and dental insurance in calendar year 2017. Benefit Plan subsidies do not cover the VSP Vision Care plan, so that premium is not included in the examples.

Benefit Plan 3

Sample Subsidy and Monthly Deduction Calculations for Under Age 65 Plans in 2017

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 Courts.

The 2017 allocation factor is \$442.65 per year of service, for a maximum annual amount of \$8,853.

The samples on this page show how much a retiree would owe for monthly medical premiums in 2017 if they retired with 10 years of service or 20 years of service.

To determine your own monthly subsidy in 2017, multiply your years of service credit by the current allocation factor (up to the maximum of 20 years), then divide by 12.

If you have less than 30 years of service, the subsidy you receive under Benefit Plan 3 only covers your own premiums. If you have dependents on your healthcare plans you are responsible for those premiums.

If you have 30 or more years of service you have a second subsidy, equal to your own, to cover all or a portion of your spouse's/partner's healthcare premiums. The second subsidy does not cover any other dependents you may have on your plans.

10 Years of Service

Subsidy Calculation

| | |
|------------------------|------------|
| 2017 Allocation factor | \$442.65 |
| Years of service | x 10.00 |
| Max. annual subsidy | \$4,426.50 |
| Max. monthly subsidy | \$368.88 |

Kaiser Silver - Under Age 65

| | |
|--------------------------|------------|
| Kaiser Silver premium | \$687.11 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$734.75 |
| Max. employer subsidy | - \$368.88 |
| Due from retiree monthly | \$365.87 |

Kaiser Low - Under Age 65

| | |
|--------------------------|------------|
| Kaiser Low premium | \$760.84 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$808.48 |
| Max. employer subsidy | - \$368.88 |
| Due from retiree monthly | \$439.60 |

Anthem Blue Cross - Under Age 65

| | |
|--------------------------|------------|
| Blue Cross premium | \$1,209.59 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$1,257.23 |
| Max. employer subsidy | - \$368.88 |
| Due from retiree monthly | \$888.35 |

20 Years of Service

Subsidy Calculation

| | |
|------------------------|------------|
| 2017 Allocation factor | \$442.65 |
| Years of service | x 20.00 |
| Max. annual subsidy | \$8,853.00 |
| Max. monthly subsidy | \$737.75 |

Kaiser Silver - Under Age 65

| | |
|--------------------------|------------|
| Kaiser Silver premium | \$687.11 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$734.75 |
| Max. employer subsidy | - \$737.75 |
| Due from retiree monthly | \$0.00 |

Kaiser Low - Under Age 65

| | |
|--------------------------|------------|
| Kaiser Low premium | \$760.84 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$808.48 |
| Max. employer subsidy | - \$737.75 |
| Due from retiree monthly | \$70.73 |

Anthem Blue Cross - Under Age 65

| | |
|--------------------------|------------|
| Blue Cross premium | \$1,209.59 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$1,257.23 |
| Max. employer subsidy | - \$737.75 |
| Due from retiree monthly | \$519.48 |

Benefit Plan 3

Sample Subsidy and Monthly Deduction Calculations for Medicare Plans (Over Age 65) in 2017

The samples on this page show how much a retiree over age 65 would owe for monthly medical premiums in 2017 if they retired with 10 years of service or 20 years of service.

Every month, you will be reimbursed up to the base Medicare Part B premium (\$134 for 2017).

Your Benefit Plan 3 subsidy is reduced by the amount of the base Medicare Part B premium and the remainder of the subsidy is used to help pay your medical and dental premiums.

To determine your own monthly subsidy in 2017, multiply your years of service credit by the current allocation factor (up to the maximum of 20 years), divide by 12, and subtract \$134 from that amount.

You will receive the reimbursement in your monthly benefit payment. It will appear on your monthly deposit confirmation as a separate line item showing an addition of \$134.

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

Remaining Subsidy after Medicare Reimbursement

| | |
|------------------------------|------------|
| Max. monthly subsidy | \$368.88 |
| Base Medicare Part B premium | - \$134.00 |
| Remaining subsidy | \$234.88 |

Kaiser Silver with Medicare (Senior Advantage)

| | |
|--------------------------|------------|
| Kaiser Silver premium | \$289.68 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$337.32 |
| Employer subsidy | - \$234.88 |
| Due from retiree monthly | \$102.44 |

Kaiser Low with Medicare (Senior Advantage)

| | |
|--------------------------|------------|
| Kaiser Low premium | \$397.83 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$445.47 |
| Employer subsidy | - \$234.88 |
| Due from retiree monthly | \$210.59 |

Anthem Blue Cross with Medicare

| | |
|--------------------------|------------|
| Blue Cross premium | \$615.81 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$663.45 |
| Max. employer subsidy | - \$234.88 |
| Due from retiree monthly | \$428.57 |

20 Years of Service

Remaining Subsidy after Medicare Reimbursement

| | |
|------------------------------|------------|
| Max. monthly subsidy | \$737.75 |
| Base Medicare Part B premium | - \$134.00 |
| Remaining subsidy | \$603.75 |

Kaiser Silver with Medicare (Senior Advantage)

| | |
|--------------------------|------------|
| Kaiser Silver premium | \$289.68 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$337.32 |
| Employer subsidy | - \$603.75 |
| Due from retiree monthly | \$0.00 |

Kaiser Low with Medicare (Senior Advantage)

| | |
|--------------------------|------------|
| Kaiser Low premium | \$397.83 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$445.47 |
| Employer subsidy | - \$603.75 |
| Due from retiree monthly | \$0.00 |

Anthem Blue Cross with Medicare

| | |
|--------------------------|------------|
| Blue Cross premium | \$615.81 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$663.45 |
| Max. employer subsidy | - \$603.75 |
| Due from retiree monthly | \$59.70 |

Benefit Plan 4

Sample Subsidy and Monthly Deduction Calculations for Under Age 65 Plans in 2017

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 2017 if they retired with 10 years of service or 20 years of service.

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.

The subsidy you receive under Benefit Plan 4 only covers your own premiums. If you have dependents on your healthcare plans you are responsible for those premiums.

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 | \$687.11 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$734.75 |
| Max. employer subsidy | - \$125.00 |
| Due from retiree monthly | \$609.75 |

Kaiser Low - Under Age 65

| | |
|--------------------------|------------|
| Kaiser Low premium | \$760.84 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$808.48 |
| Max. employer subsidy | - \$125.00 |
| Due from retiree monthly | \$683.48 |

Anthem Blue Cross - Under Age 65

| | |
|--------------------------|------------|
| Blue Cross premium | \$1,209.59 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$1,257.23 |
| Max. employer subsidy | - \$125.00 |
| Due from retiree monthly | \$1,132.23 |

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 | \$687.11 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$734.75 |
| Max. employer subsidy | - \$250.00 |
| Due from retiree monthly | \$484.75 |

Kaiser Low - Under Age 65

| | |
|--------------------------|------------|
| Kaiser Low premium | \$760.84 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$808.48 |
| Max. employer subsidy | - \$250.00 |
| Due from retiree monthly | \$558.48 |

Anthem Blue Cross - Under Age 65

| | |
|--------------------------|------------|
| Blue Cross premium | \$1,209.59 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$1,257.23 |
| Max. employer subsidy | - \$250.00 |
| Due from retiree monthly | \$1,007.23 |

Benefit Plan 4

Sample Subsidy and Monthly Deduction Calculations for Medicare Plans (Over Age 65) in 2017

The samples on this page show how much a retiree over age 65 would owe for monthly medical premiums in 2017 if they retired with 10 years of service or 20 years of service.

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.

Your Benefit Plan 4 subsidy is reduced by the amount of the base Medicare Part B premium and the remainder of the subsidy is used to help pay your medical and dental premiums.

If your maximum monthly subsidy is less than the base Medicare Part B premium, you will be reimbursed only up to your maximum monthly subsidy amount.

You will receive the reimbursement in your monthly benefit payment. It will appear on your monthly deposit confirmation as a separate line item showing an addition of \$134.

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

Remaining Subsidy after Medicare Reimbursement

| | |
|------------------------------|------------|
| Max. monthly subsidy | \$125.00 |
| Base Medicare Part B premium | - \$125.00 |
| Remaining subsidy | \$0.00 |

Kaiser Silver with Medicare (Senior Advantage)

| | |
|--------------------------|-----------|
| Kaiser Silver premium | \$289.68 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$337.32 |
| Employer subsidy | - \$0.00 |
| Due from retiree monthly | \$337.32 |

Kaiser Low with Medicare (Senior Advantage)

| | |
|--------------------------|-----------|
| Kaiser Low premium | \$397.83 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$445.47 |
| Employer subsidy | - \$0.00 |
| Due from retiree monthly | \$445.47 |

Anthem Blue Cross with Medicare

| | |
|--------------------------|-----------|
| Blue Cross premium | \$615.81 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$663.45 |
| Employer subsidy | - \$0.00 |
| Due from retiree monthly | \$663.45 |

20 Years of Service

Remaining Subsidy after Medicare Reimbursement

| | |
|------------------------------|------------|
| Max. monthly subsidy | \$250.00 |
| Base Medicare Part B premium | - \$134.00 |
| Remaining subsidy | \$116.00 |

Kaiser Silver with Medicare (Senior Advantage)

| | |
|--------------------------|------------|
| Kaiser Silver premium | \$289.68 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$337.32 |
| Employer subsidy | - \$116.00 |
| Due from retiree monthly | \$221.32 |

Kaiser Low with Medicare (Senior Advantage)

| | |
|--------------------------|------------|
| Kaiser Low premium | \$397.83 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$445.47 |
| Employer subsidy | - \$116.00 |
| Due from retiree monthly | \$329.47 |

Anthem Blue Cross with Medicare

| | |
|--------------------------|------------|
| Blue Cross premium | \$615.81 |
| Delta Dental premium | + \$47.64 |
| Total premium cost | \$663.45 |
| Employer subsidy | - \$116.00 |
| Due from retiree monthly | \$547.45 |

Monthly Premiums

for Court-sponsored Plans in 2017

| KAISER | LOW | | SILVER | |
|--|------------------------|-------------------------------|------------------------|-------------------------------|
| | 2016 Monthly Deduction | 2017 <i>Monthly Deduction</i> | 2016 Monthly Deduction | 2017 <i>Monthly Deduction</i> |
| One Person Under 65 | \$707.36 | \$760.84 | \$638.75 | \$687.11 |
| Two Persons Under 65 | \$1,414.72 | \$1,521.69 | \$1,277.51 | \$1,374.22 |
| Family (All Under 65) | \$1,881.58 | \$2,023.85 | \$1,699.09 | \$1,827.72 |
| One Person Over 65 with Sr. Advantage | \$393.58 | \$397.83 | \$281.14 | \$289.68 |
| SENIOR SURCHARGE PREMIUMS | | | | |
| Senior Advantage Enrollment with Part B Only | \$703.58 | \$707.83 | \$591.14 | \$599.68 |
| Eligible-No Enrollment or A&B Assigned Elsewhere | \$1,807.85 | \$1,850.43 | \$1,711.63 | \$1,753.84 |
| Part A Only or A&B: Unassigned Anywhere | \$1,397.20 | \$1,439.78 | \$1,300.98 | \$1,343.19 |

| ANTHEM BLUE CROSS PPO | 2016 Monthly Deduction | 2017 <i>Monthly Deduction</i> |
|--------------------------------|------------------------|-------------------------------|
| One Person Under 65 | \$1,121.65 | \$1,209.59 |
| Two Persons Under 65 | \$2,106.11 | \$2,271.23 |
| Family (All Under 65) | \$2,914.53 | \$3,143.03 |
| One Person w/ Medicare over 65 | \$563.09 | \$615.81 |

| DELTA DENTAL | 2016 Monthly Deduction | 2017 <i>Monthly Deduction</i> |
|--------------|------------------------|-------------------------------|
| One Person | \$47.64 | \$47.64 |
| Two Persons | \$89.82 | \$89.82 |
| Family | \$141.12 | \$141.12 |

| VSP VISION | 2016 Monthly Deduction | 2017 <i>Monthly Deduction</i> | The VSP Vision Care plan is <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 | |

Contact MCERA

Hours

Monday thru Friday, 8:00 AM to 5:00 PM

Closed all County holidays

Address

One McInnis Parkway
Suite 100 (first floor)
San Rafael, CA 94903-2764

Active Member Benefits

(415) 473-4148

MCERABenefits@marincounty.org

Retired Member Benefits

(415) 473-4149

MCERARetirees@marincounty.org

Workshops

(415) 473-4014

MCERAWorkshops@marincounty.org

General Information & Forms

(415) 473-6147

Website

MCERA.org

Resources Available on MCERA.org

Handbooks

Classic Member

PEPRA Member

Terminating Employment

Understanding Retirement

Disability Retirement

Fact Sheets

Dividing Community Property

Medicare

Reciprocity

Workshop Registration

Early Career for Classic Members

Early Career for PEPRA Members

Late Career

Social Security

Newsletters

Forms

Retirement Benefit Estimator