## STATE SHARE 50% RATES EFFECTIVE JULY 1, 2019-JUNE 30, 2020

Health Care Coverage (until Medicare eligible)	Total Monthly Rate	State Pays	Pensioner Pays
Highmark Delaware First State Basic Plan			
Retiree	\$695.36	\$333.76	\$361.60
Retiree & Spouse	\$1,438.68	\$690.58	\$748.10
Retiree & Child(ren)	\$1,057.02	\$507.38	\$549.64
Family	\$1,798.42	\$853.25	\$935.17
Aetna CDH Gold			
Retiree	\$719.68	\$341.85	\$377.83
Retiree & Spouse	\$1,492.22	\$706.82	\$783.40
Retiree & Child(ren)	\$1,099.56	\$522.30	\$577.26
Family	\$1,895.74	\$900.48	\$995.26
Aetna HMO			
Retiree	\$725.94	\$339.39	\$386.55
Retiree & Spouse	\$1,530.58	\$715.54	\$815.04
Retiree & Child(ren)	\$1,110.52	\$519.17	\$591.36
Family	\$1,909.82	\$892.85	\$1016.97
Highmark Delaware Comprehensive PPO Plan			
Retiree	\$793.86	\$344.34	\$449.52
Retiree & Spouse	\$1,647.34	\$714.54	\$932.80
Retiree & Child(ren)	\$1,223.46	\$530.69	\$692.77
Family	\$2,059.40	\$893.27	\$1,166.13
Highmark Delaware Medicare Supplements (Retiree and/or Spouse, when Medicare eligible) for Pensioners who retired AFTER July 1, 2012	Total Monthly Rate	State Pays	Pensioner Pays
Highmark Delaware Special Medicfill With Prescription Coverage	\$459.38	\$218.21	\$241.17
Highmark Delaware Special Medicfill WITHOUT Prescription	\$260.44	\$123.72	\$136.72
(Highmark Delaware Special Medicfill WITHOUT prescription is offered for Medicare participants enrolled in a separate Medicare Part D plan.)			