

# RETIREE RATES FOR 2018 CITY OF BAKERSFIELD

## Retiree Group Health Insurance Monthly Rates

Effective 1/1/2018

| BLUE SHIELD FEE FOR SERVICE - (Unblended) |   |              |              | ( With or Without Medicare ) |              |                      |
|---|---|--------------|--------------|------------------------------|--------------|----------------------|
| BS  | MEDICAL includes<br>Prescriptions/Mental Health | NO<br>VISION | SUB<br>TOTAL | (*) LESS 42%<br>SUBSIDY      | SUB<br>TOTAL | LESS CITY<br>FORMULA |
| Single BS1                                | \$1,073.10                                      | No Benefit   | \$1,073.10   | \$450.70                     | \$622.40     | See Below            |
| Two Party BS2                             | \$2,146.06                                      | No Benefit   | \$2,146.06   | \$901.35                     | \$1,244.71   | See Below            |
| Family BS3                                | \$3,219.12                                      | No Benefit   | \$3,219.12   | \$1,352.03                   | \$1,867.09   | See Below            |

| KAISER HMO ~ UNDER 65 (Unblended)                    |     |                    |                  |                |              |                      |
|--|-----|--------------------|------------------|----------------|--------------|----------------------|
| GROUP # 132733-1 (KP)                                |     | MEDICAL<br>PREMIUM | MENTAL<br>HEALTH | VISION<br>CARE | SUB<br>TOTAL | LESS CITY<br>FORMULA |
| Single Under 65                                      | KP1 | \$1,432.19         | Included         | \$3.45         | \$1,435.64   | See Below            |
| Two Party Under 65                                   | KP2 | \$2,864.37         | Included         | \$6.90         | \$2,871.27   | See Below            |
| Family Under 65                                      | KP3 | \$4,053.09         | Included         | \$8.97         | \$4,062.06   | See Below            |
| <b>At and over age 65 not eligible for this plan</b> |     |                    | N/A              | N/A            | N/A          | N/A                  |

| KAISER HMO ~ UNDER 65 HIGH DEDUCTIBLE PLAN (Unblended) |      |                    |                  |                |              |                      |
|--|------|--------------------|------------------|----------------|--------------|----------------------|
| GROUP # 132733-2 (KPD)                                 |      | MEDICAL<br>PREMIUM | MENTAL<br>HEALTH | VISION<br>CARE | SUB<br>TOTAL | LESS CITY<br>FORMULA |
| Single Under 65  | KPD1 | \$1,236.22         | Included         | \$3.45         | \$1,239.67   | See Below            |
| Two Party Under 65                                     | KPD2 | \$2,472.43         | Included         | \$6.90         | \$2,479.33   | See Below            |
| Family Under 65  | KPD3 | \$3,498.48         | Included         | \$8.97         | \$3,507.45   | See Below            |
| <b>At and over age 65 not eligible for this plan</b>   |      |                    | N/A              | N/A            | N/A          | N/A                  |

| MEDICARE ADVANTAGE PLANS                   |  |                              |  |                               |  |                         |
|--|--|------------------------------|--|-------------------------------|--|-------------------------|
| <i>MUST HAVE MEDICARE PARTS A &amp; B</i>  |  | SINGLE<br>MEDICAL<br>PREMIUM |  | 2 PARTY<br>MEDICAL<br>PREMIUM |  | LESS<br>CITY<br>FORMULA |
| Blue Shield Medicare Advantage BS65+1/2    |  | \$364.95                     |  | \$729.90                      |  | See Below               |
| Kaiser Senior Advantage #132733-4 KPSA 1/2 |  | \$229.69                     |  | \$459.38                      |  | See Below               |

| Optional Retiree Dental Plan        |                  |                |
|-------------------------------------|------------------|----------------|
| UNITED CONCORDIA (DHMO) DENTAL PLAN |                  |                |
| <i>Concordia Plus Plan #1621</i>    |                  |                |
| <u>Single</u>                       | <u>Two Party</u> | <u>Family</u>  |
| <b>\$16.17</b>                      | <b>\$29.43</b>   | <b>\$45.49</b> |

### City Formulas for Retired Employees Contributions

#### Condition of participation in the Retiree Medical

Miscellaneous, Supervisory & Management Employees hired before 4/1/96 must have 15 years of service with the City  
 Miscellaneous, Supervisory & Management Employees hired between 4/1/96 & 2/22/06 must have 20 years of service with the City  
 Miscellaneous, Supervisory & Management Employees hired after 2/22/06 may not participate in Retiree medical  
 Safety Employees hired before 4/1/98 must have 15 years of service with the City  
 Safety Employees hired between 4/1/98 & 5/5/06 Fire, 5/24/06 Police must have 20 years of service with the City  
 Fire Safety Employees hired after 5/5/06 may not participate in the Retiree medical  
 Police Safety Employees hired after 5/24/06 may not participate in the Retiree medical  
 Employees retiring on a Disability may participate in the Retiree medical, and will receive their normal years of service or 8 years whichever is greater

#### Condition of receiving the 42% special contribution to the PPO plan (\*)

Miscellaneous, Firefighters, Fire Engineers, Supervisory & Management Employees hired after 4/1/96 do not receive the 42% special contribution  
 Safety Employees hired after 4/1/98 do not receive the 42% special contribution

#### Medicare Part B refund

Retirees enrolled in a Medicare Risk plan may receive a Medicare Part B refund of up to \$42.50 providing they have sufficient years of service dollars

#### Year of Service Formula

Effective 1/1/89 - 3% of the lowest Single HMO premium to a maximum of 30 years

2018 Lowest HMO rate - Kaiser Active High Ded. \$338.23 x 3% = **\$10.15 per year of service** 30 year maximum \$304.50

For further information contact Human Resources 661-326-3773

**NOTE:**  
 According to the Affordable Care Act (ACA) the maximum age for children on the Retiree plan is age 23. Children between the ages of 19-23 must be enrolled in school and earning 12 or more credits. Dental: Children under the age of 26 may remain on the dental plan.