

2021 Plan Options and Rates for Henrico County Pre-65 Retirees

Pre-65 Members (non-Medicare eligible)

2021 Anthem Plan Options				
<i>All members Pre- 65/Not Medicare Eligible</i>	Premier POS	Standard POS	HK HDHP- HSA	Out-of-Area PPO
Retiree Only	\$736.70	\$639.64	\$330.38	\$736.70
Retiree & Child	\$1,119.82	\$972.30	\$502.22	\$1,119.82
Retiree & Children	\$1,694.30	\$1,471.12	\$759.88	\$1,694.30
Retiree & Spouse	\$1,414.32	\$1,228.00	\$634.30	\$1,414.32
Retiree & Family	\$2,143.56	\$1,861.10	\$961.34	\$2,143.56

Pre-65 Members (Medicare eligible)

2021 Anthem Plan Options			
<i>Member(s) Pre- 65/Medicare Eligible</i>	Premier POS	Standard POS	Out-of-Area PPO
Retiree Only	\$663.03	\$575.68	\$663.03
Retiree & Child	\$1,007.84	\$875.07	\$1,007.84
Retiree & Children	\$1,524.87	\$1,324.01	\$1,524.87
Retiree & Spouse	\$1,272.89	\$1,105.20	\$1,272.89
Retiree & Family	\$1,929.20	\$1,674.99	\$1,929.20

Split Family Enrollment

Some retiree families will have members who are both Post-65 Medicare eligible and Pre-65 non-Medicare eligible.

2021 Anthem Plan Options				
<i>Pre-65 non-Medicare member(s) with Post-65 Medicare Eligible member(s)</i>	Premier POS	Standard POS	HK HDHP- HSA	Out-of-Area PPO
Retiree Only (spouse on Medicare)	\$736.70	\$639.64	\$330.38	\$736.70
Spouse Only (spouse of retiree who is on Medicare)	\$736.70	\$639.64	\$330.38	\$736.70
Child Only (parents on Medicare)	\$697.48	\$618.46	N/A	\$697.48
Children (parents on Medicare)	\$1,119.82	\$972.30	N/A	\$1,119.82
Retiree & Child (retiree's spouse on Medicare)	\$1,119.82	\$972.30	\$502.22	\$1,119.82
Spouse & Child (spouse of retiree on Medicare)	\$1,119.82	\$972.30	\$502.22	\$1,119.82
Retiree & Children (retiree's spouse on Medicare)	\$1,694.30	\$1,471.12	\$759.88	\$1,694.30
Spouse & Children (spouse of retiree on Medicare)	\$1,694.30	\$1,471.12	\$759.88	\$1,694.30

2021 Options and Rates for Henrico County Pre-65 Retirees (continued)

Important Enrollment Information For All Retiree Members:

You must complete an Anthem enrollment form to make any changes to your current enrollment or enroll through Via Benefits if Medicare eligible. You and your covered dependents can be enrolled as described on the reverse side. Please note, disabled members may become Medicare eligible prior to age 65.

You may change your plan option or add or drop dependent(s) during Open Enrollment each year.

You may select a different plan option by completing the appropriate process: submit an Anthem enrollment form if you are pre-65 or enroll by phone through Via Benefits if you are Medicare eligible. Open Enrollment changes become effective January 1st of the following year.

Note: Once you waive or terminate (cancel) retiree health coverage with Henrico County, you cannot re-enter the retiree health plan. We want to caution you that depending upon your personal circumstances; it may be difficult for you to easily or affordably purchase replacement coverage on an individual basis.

If you are a Medicare eligible retiree currently covered on a County sponsored plan, you may enroll for individual Medicare Advantage, Medigap and/or Medicare Part D policies through County sponsored Via Benefits services. If you choose to enroll in a plan outside of the County sponsored Via Benefits, you will only be allowed to enroll in individual Medicare Advantage and Medicare Part D policies during an annual open enrollment period (from October 15 through December 7), and the companies that sell Medigap (Medicare Supplement) policies may set your premiums based upon your medical history and age. So, while your application for a Medigap policy cannot be declined, you may be required to pay substantially higher premium rates if you are older or have ongoing health issues. To obtain more detailed information regarding Medicare and other health insurance for people with Medicare, you may look at www.medicare.gov on the web or call 1-800-MEDICARE (1-800-633-4227).

If you are a retiree who is not eligible for Medicare, and are considering other plans you may wish to review your options in the Health Insurance Marketplace with the implementation of the Affordable Care Act. For further details, visit www.healthcare.gov or call 1-800-318-2596.

2021 MONTHLY DELTA DENTAL PREMIUMS

	Delta PPO-EPO	High Option PPO	Low Option PPO
Subscriber Only	\$21.92	\$37.08	\$24.86
Subscriber & One Dependent	\$36.49	\$67.07	\$44.93
Subscriber & Family	\$49.23	\$105.31	\$70.49