



## Retiree Out of State 2024 Monthly Rates

<b>MEDICAL ONLY - NO DENTAL</b>			
Medical Plan	RETIREE ONLY	RETIREE + 1	FAMILY
UnitedHealthcare Choice Plus PPO	\$ 475.61	\$ 2,407.88	\$ 3,723.78
UnitedHealthcare Non-Differential PPO	\$ 679.61	\$ 2,844.88	\$ 4,323.78

<b>MEDICAL AND DENTAL COVERAGE</b>			
Medical Plan	<b>With Delta Dental PPO</b>		
	RETIREE ONLY	RETIREE + 1	FAMILY
UnitedHealthCare Choice Plus PPO	\$ 496.22	\$ 2,452.80	\$ 3,803.13
UnitedHealthCare Non-Differential PPO	\$ 700.22	\$ 2,889.80	\$ 4,403.13