

## 2025 Retiree Benefits Rate Sheet Parker County

### Important Information about Retiree Rates

Parker County adopted a years-of-service retiree medical premium model effective January 1, 2022. This means that Parker County will subsidize medical premium for the retiree only as long as you meet these conditions:

1. You retired January 1, 2022 or later, are under age 65 and you have at least thirty (30) years of service with Parker County on your retirement date.
2. You retired January 1, 2025 or later, are under age 65 and you have at least twenty-five (25) years of service with Parker County on your retirement date.
3. You retired January 1, 2022 or later, you have at least ten (10) years of service with Parker County and are enrolled in Medicare Part A and Part B effective on or before the plan effective date and you enroll in a Medicare medical plan.

If you are under age 65 and you do **not** meet the conditions outline above, you can still enroll in a retiree medical plan; however, you pay the full cost of retiree medical coverage. Neither the dental plans nor the vision plan costs are based on years of service at Parker County. Sponsored dependents (spouse of deceased retiree) premium is the full cost of retiree medical coverage. If you cover your spouse on a medical plan (or you are the surviving spouse of a retiree), cost is subject to the Spouse Medical Plan Surcharge and an affidavit is required.

#### Under-age-65 Retirees

- If you have at least twenty-five (25) years of service, refer to **Box 1** below to determine your monthly medical premium.
- If you **do not** have at least twenty-five (25) years of service, refer to **Box 2** for your monthly medical premium
- If you are enrolled in Medicare Part A and Part B, you may be eligible for the Medicare Advantage Group Plans. Refer to **Box 5** for Medicare Advantage PPO (MPO/MPD) and HMO (PMA/PMD) monthly premium.

#### Age-65-or-older Medicare Eligible Retirees

- If you have at least ten (10) years of service, refer to **Box 5** for your monthly medical premium (see back of form).
- If you **do not** have at least ten (10) years of service, refer to **Box 6** for your monthly medical premium (see back of form).

### Box 1 - Medical Plans – Retirees Under-Age-65 (spouse of any age)

Retirement Date: January 1, 2022 or later with at least twenty-five (25) years of service at Parker County

Medical Option <i>*Spouse Medical Plan Surcharge Affidavit Required</i>	Retiree Only	Retiree plus Spouse	Retiree plus Child(ren)	Retiree plus Family
PPO Plan	713.10	2,282.01*	1,996.71	3,565.59*
HDP (High Deductible Plan)	755.18	2,415.80*	2,114.51	3,775.90*
<i>If you are enrolled in Medicare Parts A &amp; B, you may qualify for the MPO/MPD or PMA/PMD Plan. Refer to Box 5 or Box 6.</i>				

### Box 2 - Medical Plans – Retirees Under-Age-65 (spouse of any age)

Retirement Date: January 1, 2022 or later with less than twenty-five (25) years of service at Parker County

Medical Option <i>*Spouse Medical Plan Surcharge Affidavit Required</i>	Retiree Only	Retiree plus Spouse	Retiree plus Child(ren)	Retiree plus Family
PPO Plan	1,426.20	2,995.11*	2,709.81	4,278.69*
HDP (High Deductible Plan)	1,510.36	3,170.98*	2,869.69	4,531.08*
<i>If you are enrolled in Medicare Parts A &amp; B, you may qualify for the MPO/MPD or PMA/PMD Plan. Refer to Box 5 or Box 6.</i>				

### Box 3 - Monthly Dental Rates – Retirees of any age and sponsored dependents

Regardless of retirement date or years of service at Parker County

Dental Option	Retiree Only	Retiree plus Spouse	Retiree plus Child(ren)	Retiree plus Family
<b>ANT</b> Delta Dental Care USA DHMO Plan	11.94	20.34	26.84	34.30
<b>PEB</b> PEBC PPO Dental Plan – Delta Dental	37.18	74.36	74.36	111.48

### Box 4 - Monthly Vision Rates – Retirees of any age and sponsored dependents

Regardless of retirement date or years of service at Parker County

Vision Option	Retiree Only	Retiree plus Spouse	Retiree plus Child(ren)	Retiree plus Family
<b>VIS</b> VSP Vision Plan	6.25	11.70	12.45	19.40

**Box 5 - Medical Plans – Retirees Enrolled in Medicare Regardless of Age**

**Medicare Part A and Part B Required**

**Retirement Date: January 1, 2022 or later with at least ten (10) years of service with Parker County**

Medical Option <i>*Spouse Medical Plan Surcharge Affidavit Required</i>	Retiree Only	Retiree plus Spouse	Retiree plus Child(ren)	Retiree plus Family
<b>MPO</b> Blue Cross Group Medicare Advantage (PPO)	0.00	260.00	N/A	N/A
<b>MPD</b> Retiree enrolled in MPO Plan <b>and</b> non-Medicare eligible spouse and/or dependents enrolled in PEBC PPO Plan <b>MPD</b> rate (spouse enrolled in MPO Plan)	N/A N/A	2,903.00* N/A	2,375.00 N/A	5,277.00* 2,635.00
<b>PMA</b> Blue Cross Group Medicare Advantage (HMO)	0.00	130.00	N/A	N/A
<b>PMD</b> Retiree enrolled in PMA Plan <b>and</b> non-Medicare eligible spouse and/or Dependents enrolled in PEBC PPO Plan <b>PMD</b> rate (spouse enrolled in PMA Plan)	N/A N/A	2,903.00* N/A	2,375.00 N/A	5,277.00* 2,505.00

**Box 6 - Medical Plans – Retirees Enrolled in Medicare Regardless of Age**

**Medicare Part A and Part B Required**

**Retirement Date: January 1, 2022 or later without ten (10) years of service (or more) with Parker County**

Medical Option <i>*Spouse Medical Plan Surcharge Affidavit Required</i>	Retiree Only	Retiree plus Spouse	Retiree plus Child(ren)	Retiree plus Family
<b>MPO</b> Blue Cross Group Medicare Advantage (PPO)	260.00	520.00	N/A	N/A
<b>MPD</b> Retiree enrolled in MPO Plan <b>and</b> non-Medicare eligible spouse and/or dependents enrolled in PEBC PPO Plan <b>MPD</b> rate (spouse enrolled in MPO Plan)	N/A N/A	3,163.00* N/A	2,635.00 N/A	5,537.00* 2,895.00
<b>PMA</b> Blue Cross Group Medicare Advantage (HMO)	130.00	260.00	N/A	N/A
<b>PMD</b> Retiree enrolled in PMA Plan <b>and</b> non-Medicare eligible spouse and/or Dependents enrolled in PEBC PPO Plan <b>PMD</b> rate (spouse enrolled in PMA Plan)	N/A N/A	3,033.00* N/A	2,505.00 N/A	5,407.00* 2,635.00

**Important information if you enroll in the High Deductible Plan (HDP) with Health Savings Account (HSA)**

You must file IRS Form 8889 with your annual tax return to report contributions to and distributions from your HSA. HSA contributions, investment earnings (if any) and withdrawals (if made for qualified medical expenses) are generally not taxable for federal (and, in most cases, state and local) income tax purposes. However, under certain circumstances, your HSA may be subject to taxes and/or penalties. And, if your HSA contributions for any year exceed the annual limit, you are responsible for contacting your bank to request a refund of the excess.

Be sure to save receipts for all withdrawals from your HSA. You are responsible for verifying eligible medical expenses under the IRS tax code. Some of your responsibilities include:

- Determining your eligibility to contribute to an HSA
- Keeping receipts to show you used your HSA for qualified medical expenses
- Tracking contribution limits and withdrawing any excess contributions
- Making sure funds are transferred to a qualified HSA, and
- Identifying tax implications and reporting distributions to the IRS.

Once your account is open, contact your bank for detailed information about eligible expenses and your responsibilities regarding contributions and record keeping. Your employer cannot provide you tax advice. If you enroll in Medicare, you are no longer eligible to contribute to an HSA; however, you can use the funds already in your HSA for qualified medical expenses (see IRS Publication 969). Contact the IRS or consult with a qualified tax advisor for specific advice about your situation.