

RETIREEES 65+ WITH LIMITED OR NO MEDICARE / IN CALIFORNIA SERVICE AREAS
RETIREE 2009 MONTHLY RATES

This rate schedule applies only if you or your spouse is 65+ and does not receive both Part A & B Medicare. The rates displayed reflect the most common combinations. If you need assistance identifying an applicable rate, contact the Benefits Operations Office at (619) 725-8130.

For these plans, enrollees receiving Part A & B will be enrolled in the Medicare plan. Enrollees with limited or no Medicare will be enrolled in the non-Medicare plan (e.g. HMO).	KAISER	PACIFICARE WITH HMO	PACIFICARE WITH POS
One person, 65+ with Part A only	1,163.71	1,627.20	1,971.51
One person, 65+ with no Medicare (grandfathered)	844.44	N/A	N/A
One person, 65+ with Part B only, no Medicare, or Medicare assigned to another carrier	1,163.71	1,627.20	1,971.51
Two people, both 65+ with no Medicare	2,318.17	3,245.11	3,928.27
Two people, one with A/B, one with Part A only	1,498.22	N/A	N/A
Two people; one with A/B, one with Part B, no Medicare, or Medicare assigned to another carrier (or Part A only under PacifiCare)	1,498.22	1,940.31	2,384.69
Two people; one < 65, one with Part A or B, no Medicare, or Medicare assigned to another carrier	1,535.68	2,102.84	2,550.42
Family rate, both 65+ with no Medicare	2,690.14	3,661.97	4,438.29
Family rate, one with A/B, one 65+ with Part A or B, no medicare or Medicare assigned to another carrier	1,870.19	2,358.83	2,824.08
Family rate, one < 65, one 65+ with no Medicare or A only or B only	1,907.66	2,482.95	3,060.44

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