## Monthly Retiree Health InsuranceRates January1 through December31,2024





Retiree under

\$158.90
\$361.12
\$505.57
\$650.02
¢E2E 42
\$525.62 \$814.34
\$1,110.46
\$1,332.55
\$1,332.33
\$474.34
\$734.89
\$1,002.12
\$1,202.54
*0.00
\$860.20
\$1,300.04
\$1,733.39
\$1,950.06
\$299.05
\$529.30
\$729.80
\$902.28
\$665.77
\$982.51
\$1,334.69
\$1,584.81
 e surviving spouse also

<sup>\*\*</sup>If a covered retiree dies, the surviving spouse and/or dependent children may continue coverage by paying the full cost of the premium by personal check. If the surviving spouse also is a retiree of Arlington Public Schools, he or she may elect to continue coverage with the School Board's contribution computed based on the surviving spouse's service.

## Monthly Retiree Health InsuranceRates January1 through December31,2024

RetireeUnder65 (non Medicareeligible): CareFirsLowOption

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