## RETIREE RATES FOR HEALTH CARE COVERAGE

These rates are effective January 1, 2020 through December 31, 2020:

CHP/FL BLUE - RETIREE					
Coverage	2020	2019	Difference		
Individual	549.12	523.12	26.00		
2 Party	1,147.29	1,094.63	52.66		
Family	1,546.78	1,475.46	71.32		

CHP MEDICARE ADVANTAGE PLAN					
Coverage	2020	2019	Difference		
Individual (Medicare)	198.32	198.32	0		
2 Party (Both Medicare)	400.42	400.42	0		
2 Party (One Medicare)	743.59	717.02	26.57		
Family (Medicare)	1,215.14	1,166.00	49.14		

FL BLUE – POST 65					
Coverage	2020	2019	Difference		
Post 65-Individual	460.86	438.66	22.20		
Post 65 -Two Party	969.37	922.67	46.70		
Post 65–2 Party/1 Under	969.37	922.67	46.70		
Post 65 - Family	1,336.63	1,272.24	64.39		

FL BLUE MEDICARE ADVANTAGE PLAN - POST 65					
Coverage	2020	2019	Difference		
Individual (Medicare)	179.04	NA	NA		
2 Party (Both Medicare)	361.86	NA	NA		
2 Party (One Medicare)	718.20	NA	NA		
Family (One Medicare)	1,907.36	NA	NA		
Family (Both Medicare) + 1 Dep	816.58	NA	NA		
Family (Both Medicare) + 2/More Dep	1,314.16	NA	NA		