



2021 Monthly Subscriber Premiums

Medicare Advantage Plan

Medicare Retirees/Survivors, Long-Term Disability
& Terminated Vested Subscribers

(with Medicare Dependent(s), if applicable)

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Important Note About MCHCP Contributions

Those with Medicare will be enrolled in the Medicare Advantage Plan. Premiums listed in this guide do reflect the MCHCP contribution, and are what subscribers will owe each month. The contribution is based on level of coverage, creditable years of service at retirement and Medicare status.

To review the MCHCP contribution amount or calculate premiums, log into myMCHCP. If you need additional help determining your premium, contact MCHCP Member Services at 800-487-0771. If you have more than three dependents, contact MCHCP for the premium amount for coverage.

Medicare Advantage Plan

Retired Subscriber After July 1, 2002

<i>Years of Service</i>	Retiree/ Survivor	Retiree/Survivor & 1 Dependent	Retiree/Survivor & 2 Dependents	Retiree/Survivor & 3 Dependents
1 year	\$212	\$423	\$635	\$847
2 years	206	412	618	824
3 years	201	401	602	803
4 years	195	391	586	781
5 years	190	380	570	760
6 years	184	369	553	737
7 years	179	358	537	716
8 years	174	347	521	695
9 years	168	336	504	672
10 years	163	325	488	651
11 years	157	315	472	629
12 years	152	304	456	608
13 years	146	293	439	585
14 years	141	282	423	564
15 years	136	271	407	543
16 years	130	260	390	520
17 years	125	250	375	500
18 years	119	239	358	477
19 years	114	228	342	456
20 years	108	217	325	433
21 years	103	206	309	412
22 years	98	195	293	391
23 years	92	184	276	368
24 years	87	174	261	348
25 years	81	163	244	325
26 years or more	76	152	228	304

Retired Subscriber Before July 1, 2002

<i>Years of Service</i>	Retiree/ Survivor	Retiree/Survivor & Spouse
1–21 years	\$99	\$201
22 years	98	195
23 years	92	184
24 years	87	174
25 years	81	163
26 years or more	76	152

Non-Retired Subscriber Categories

	Subscriber	Subscriber & Spouse
Long-Term Disability	\$99	\$201
Terminated Vested	217	434

Dental and Vision

Dental Premiums

Subscriber Only		Subscriber and Spouse		Subscriber and Child(ren)		Subscriber and Family	
\$23.44		\$46.68		\$48.44		\$81.22	

Vision Premiums

Subscriber Only		Subscriber and Spouse		Subscriber and Child(ren)		Subscriber and Family	
Basic Plan	Premium Plan	Basic Plan	Premium Plan	Basic Plan	Premium Plan	Basic Plan	Premium Plan
\$3.70	\$4.67	\$7.41	\$9.33	\$10.68	\$13.47	\$15.24	\$19.22