

**CITY OF AURORA
GROUP HEALTH/DENTAL PREMIUMS
RETIREE 2018**

**AURORA SUPERVISORS ASSOCIATION
PRE MEDICARE RETIREE HEALTH PLAN**

CITY OF AURORA COMPREHENSIVE HEALTH PLAN

Eligible Retiree/Surviving Spouse/Medicare Supplemental Coverage*	Monthly Amount
Retiree	\$ 216.37**
Retiree + 1	\$ 705.60**
Retiree + Family	\$1,053.70**

DENTAL PLAN

Retiree Cost Per Month

Eligible Retiree/Surviving Spouse*	2018 Monthly Amount
Retiree	\$ 40.39
Retiree + 1	\$ 82.12
Retiree + Family	\$108.85

* Eligibility extends only to spouse to whom employee is married at time of retirement.

** Subject to change pending collective bargaining.