# CITY OF AURORA GROUP HEALTH/DENTAL PREMIUMS 2020

# EXECUTIVES & NON-EXEMPT PRE MEDICARE RETIREE HEALTH PLAN

## CITY OF AURORACOMPREHENSIVE HEALTH PLAN

**Retiree Cost per Month** 

Eligible Retiree/Surviving Spouse/Medicare	
Supplemental Coverage*	Monthly Amount
Retiree	\$ 194.74
Retiree + 1	\$ 656.20
Retiree + Family	\$ 948.33

### **DENTAL PLAN**

#### **Retiree Cost Per Month**

Eligible Retiree/Surviving Spouse*	2020 Monthly Amount
Retiree	\$ 40.39
Retiree + 1	\$ 82.12
Retiree + Family	\$108.85

<sup>\*</sup> Eligibility extends only to spouse to whom employee is married at time of retirement.

For active employees: Check pay plan for applicable contribution percentage of the prevailing premium based on hire date and years of service.