## RETIREE RATES FOR HEALTH CARE COVERAGE

These rates are effective January 1, 2025 through December 31, 2025:

CHP/FL BLUE - RETIREE					
Coverage	2025	2024	Difference		
Individual	722.12	669.50	52.62		
2 Party	1,496.81	1,390.49	106.32		
Family	2,022.22	1,877.60	144.62		

CHP MEDICARE ADVANTAGE PLAN					
Coverage	2025	2024	Difference		
Individual (Medicare)	225.69	206.40	19.29		
2 Party (Both Medicare)	455.16	416.58	38.58		
2 Party (One Medicare)	932.25	856.84	75.41		
Family (Medicare)	1,540.84	1,417.74	123.10		

FL BLUE MEDICARE ADVANTAGE PLAN - POST 65					
Coverage	2025	2024	Difference		
Individual (Medicare)	259.72	245.55	14.17		
2 Party (Both Medicare)	523.22	494.88	28.34		
2 Party (One Medicare)	1,029.60	961.73	67.87		
Family (One Medicare)	1,567.10	1,460.93	106.17		
Family (Both Medicare) + 1 Dep	1,211.66	1,129.62	82.04		
Family (Both Medicare) + 2/More Dep	1,864.58	1,744.24	120.34		