

Monthly Rates for 2020 (Non-Medicare Standard Rates for Members Age 41 and Over)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C	Dental Plan	Annual Vision Rates
One adult	\$985	\$838	\$675	\$42.50	\$100
Two adults	\$1,955	\$1,680	\$1,354	\$82	\$183
One adult with child(ren)	\$1,923	\$1,654	\$1,334	\$83.25	\$164
Two adults with child(ren)	\$2,106	\$1,774	\$1,426	\$93.50	\$249

Monthly Rates for 2020 (Non-Medicare Standard Rates for Members Age 40)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C	Dental Plan	Annual Vision Rates
One adult	\$738	\$628	\$506	\$42.50	\$100
Two adults	\$1,466	\$1,260	\$1,015	\$82	\$183
One adult with child(ren)	\$1,442	\$1,240	\$1,000	\$83.25	\$164
Two adults with child(ren)	\$1,579	\$1,330	\$1,069	\$93.50	\$249

Monthly Rates for 2020 (Non-Medicare Standard Rates for Members Age 35 through 39)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C	Dental Plan	Annual Vision Rates
One adult	\$522	\$444	\$357	\$42.50	\$100
Two adults	\$1,036	\$890	\$717	\$82	\$183
One adult with child(ren)	\$1,019	\$876	\$707	\$83.25	\$164
Two adults with child(ren)	\$1,116	\$940	\$755	\$93.50	\$249

Monthly Rates for 2020 (Non-Medicare Standard Rates for Members Age 30 through 34)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C	Dental Plan	Annual Vision Rates
One adult	\$571	\$486	\$391	\$42.50	\$100
Two adults	\$1,133	\$974	\$785	\$82	\$183
One adult with child(ren)	\$1,115	\$959	\$773	\$83.25	\$164
Two adults with child(ren)	\$1,221	\$1,028	\$827	\$93.50	\$249

Monthly Rates for 2020 (Non-Medicare Standard Rates for Members Age 25 through 29)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C	Dental Plan	Annual Vision Rates
One adult	\$531	\$452	\$364	\$42.50	\$100
Two adults	\$1,055	\$907	\$731	\$82	\$183
One adult with child(ren)	\$1,038	\$893	\$720	\$83.25	\$164
Two adults with child(ren)	\$1,137	\$957	\$770	\$93.50	\$249

Monthly Rates for 2020 (Non-Medicare Rates for Members under Age 25)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C	Dental Plan	Annual Vision Rates
One adult	\$344	\$293	\$236	\$42.50	\$100
Two adults	\$684	\$588	\$473	\$82	\$183
One adult with child(ren)	\$673	\$578	\$466	\$83.25	\$164
Two adults with child(ren)	\$737	\$620	\$499	\$93.50	\$249

*All rates are monthly, **except Vision**

*The correct age rate is based on the employee's age as of Jan. 1 of the current Plan Year.

*If an employee will age into a different age band, their rate will not change until Jan. 1 of the following Plan Year.

**Medicare Supplement Plan with Rx Rates for 2020
For Working Participants**

Medicare Supplement Plan Rates	Quarterly	Monthly
Single	\$1,023	\$341
Two Medicare adults	\$1,944	\$648
Two Medicare adults with Medicare child(ren)	\$2,559	\$853
Single with Medicare child(ren)	\$1,944	\$648

Monthly rates for those participants with Non-Medicare Covered Spouses/Partners and/or Dependents:

Coverage Type	Contribution Rate	Contribution Rate	Contribution Rate
	Plan A	Plan B	Plan C
Single with non-Medicare child(ren)	\$1,154	\$1,016	\$863
Two Medicare adults with non-Medicare child(ren)	\$1,328	\$1,157	\$973
Two adults, one non-Medicare	\$1,143	\$1,006	\$853
2 adults, 1 non-Medicare w/ non-Medicare child(ren)	\$1,336	\$1,172	\$983
2 adults, 1 non-Medicare w/ Medicare child(ren)	\$1,194	\$1,089	\$1,076

2020 UCC Dental Plan 2000 Rates	Quarterly	Monthly
Single	\$127.50	\$42.50
Two Adults	\$246	\$82
Adult with child(ren)	\$249.75	\$83.25
Two adults with child(ren)	\$280.50	\$93.50

2020 UCC Vision Plan Rates	Annual
Single	\$100
Two Adults	\$183
Adult with child(ren)	\$164
Two adults with child(ren)	\$249

Medicare Supplement Plan with Rx Rates for 2020 For Retired Participants

Medicare Supplement Plan Rates	Standard Plan Monthly	Value Plan Monthly
Single	\$341	\$285
Two Medicare adults	\$648	\$542
Two Medicare adults with Medicare child(ren)	\$853	\$713
Single with Medicare child(ren)	\$648	\$542

Monthly rates for those participants with Non-Medicare Covered Spouses/Partners and/or Dependents:

STANDARD PLAN Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C
Single with non-Medicare child(ren)	\$1,154	\$1,016	\$863
Two Medicare adults with non-Medicare child(ren)	\$1,328	\$1,157	\$973
Two adults, one non-Medicare	\$1,143	\$1,006	\$853
2 adults, 1 non-Medicare w/ non-Medicare child(ren)	\$1,336	\$1,172	\$983
2 adults, 1 non-Medicare w/ Medicare child(ren)	\$1,194	\$1,089	\$1,076

VALUE PLAN Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C
Single with non-Medicare child(ren)	\$1,100	\$961	\$808
Two Medicare adults with non-Medicare child(ren)	\$1,217	\$1,047	\$863
Two adults, one non-Medicare	\$1,087	\$950	\$798
2 adults, 1 non-Medicare w/ non-Medicare child(ren)	\$1,281	\$1,116	\$929
2 adults, 1 non-Medicare w/ Medicare child(ren)	\$1,084	\$979	\$966

2020 UCC Dental Plan 2000 Rates	Monthly
Single	\$42.50
Two Adults	\$82
Adult with child(ren)	\$83.25
Two adults with child(ren)	\$93.50

2020 UCC Vision Plan Rates	Annual
Single	\$100
Two Adults	\$183
Adult with child(ren)	\$164
Two adults with child(ren)	\$249