

**State of Delaware  
Group Health Insurance Plan  
Non-Medicare Pensioner Rates Effective July 1, 2021**

	<b>Total Monthly Rate</b>	<b>State Pays</b>	<b>Pensioner Pays</b>
<b>Highmark Delaware First State Basic Plan</b>			
Individual	\$695.36	\$667.52	\$27.84
Individual & Spouse	\$1,438.68	\$1,381.16	\$57.52
Individual & Child(ren)	\$1,057.02	\$1,014.76	\$42.26
Family	\$1,798.42	\$1,726.50	\$71.92
<b>Aetna CDH Gold Plan</b>			
Individual	\$719.68	\$683.70	\$35.98
Individual & Spouse	\$1,492.22	\$1,417.64	\$74.58
Individual & Child(ren)	\$1,099.56	\$1,044.60	\$54.96
Family	\$1,895.74	\$1,800.96	\$94.78
<b>Aetna HMO Plan</b>			
Individual	\$725.94	\$678.78	\$47.16
Individual & Spouse	\$1,530.58	\$1,431.08	\$99.50
Individual & Child(ren)	\$1,110.52	\$1,038.34	\$72.18
Family	\$1,909.82	\$1,785.70	\$124.12
<b>Highmark Delaware Comprehensive PPO Plan</b>			
Individual	\$793.86	\$688.68	\$105.18
Individual & Spouse	\$1,647.34	\$1,429.08	\$218.26
Individual & Child(ren)	\$1,223.46	\$1,061.38	\$162.08
Family	\$2,059.40	\$1,786.54	\$272.86
<b>Dominion National HMO Select Dental Plan</b>			
Individual	\$26.26	\$0.00	\$26.26
Individual & Spouse	\$48.84	\$0.00	\$48.84
Individual & Child(ren)	\$52.64	\$0.00	\$52.64
Family	\$71.50	\$0.00	\$71.50
<b>Delta Dental PPO Plus Premier Plan</b>			
Individual	\$38.80	\$0.00	\$38.80
Individual & Spouse	\$79.20	\$0.00	\$79.20
Individual & Child(ren)	\$77.74	\$0.00	\$77.74
Family	\$129.74	\$0.00	\$129.74
<b>EyeMed Vision Care High Plan</b>			
Individual	\$13.06	\$0.00	\$13.06
Individual & Spouse	\$20.64	\$0.00	\$20.64
Individual & Child(ren)	\$21.04	\$0.00	\$21.04
Family	\$33.94	\$0.00	\$33.94
<b>EyeMed Vision Care Low Plan</b>			
Individual	\$6.48	\$0.00	\$6.48
Individual & Spouse	\$10.24	\$0.00	\$10.24
Individual & Child(ren)	\$10.42	\$0.00	\$10.42
Family	\$16.84	\$0.00	\$16.84

*If you have less than 20 years of service and were first hired on or after July 1, 1991,  
the State does not pay the full state share but will pay a percentage of the state share of the  
cost of your coverage as explained in the charts below.*

<b>Eligible Pensioners Hired By The State On Or After July 1, 1991 Through December 31, 2006</b> <i>(The following portion of the State Share will be paid by the State)</i> <b>(Except those receiving a disability pension or receiving an LTD benefit from The Hartford)</b>		
Less than 10 years service	0%	state share paid by state
10 years - less than 15 years service	50%	state share paid by state
15 years - less than 20 years service	75%	state share paid by state
20 years or more service	100%	state share paid by state
<b>Eligible Pensioners Hired By The State On Or After January 1, 2007</b> <i>(The following portion of the State Share will be paid by the State)</i> <b>(Except those receiving a disability pension or receiving an LTD benefit from The Hartford)</b>		
Less than 15 years service	0%	state share paid by state
15 years - less than 17.5 years service	50%	state share paid by state
17.5 years - less than 20 years service	75%	state share paid by state
20 years or more service	100%	state share paid by state