

**STATE OF DELAWARE**  
**GROUP HEALTH INSURANCE PLAN**  
**COUNTY & MUNICIPAL POLICE / FIREFIGHTER PENSION PLAN**

*Entitled to Health Cost Offset*

**Medicare Supplement Plan  
Highmark Delaware Special Medicfill**

**RATES EFFECTIVE JANUARY 1, 2025 TO DECEMBER 31, 2025**

*Rates apply to retirees in the plan who retired on or after 7/1/15  
and*

*Rates apply to survivors in this plan whose survivor's pension was effective on or before 7/1/15*

<b>SPECIAL MEDICFILL with Prescription</b>	<b>Total Monthly Rate</b>	<b>Health Cost Offset</b>	<b>Pensioner Pays</b>
Individual	\$612.40	\$489.92	\$122.48

<b>SPECIAL MEDICFILL without Prescription</b>	<b>Total Monthly Rate</b>	<b>Health Cost Offset</b>	<b>Pensioner Pays</b>
Individual	\$347.20	\$277.76	\$69.44

*This information is provided by the State of Delaware Office of Pensions  
If you have any questions, please contact the Benefits Section of the Office of Pensions  
at (302) 739-4208 or (800) 722-7300*

