

Health Premiums
Effective: July 1, 2025
25% Blended Rate

Plan Name	Coverage Type	Retiree Pays per Month	City Pays	Total Cost Monthly
Highmark Delaware First State Basic	Retiree Only	\$ -	\$ 1,151.04	\$ 1,151.04
	Spouse of Retiree Only	\$ 287.77	\$ 863.27	\$ 1,151.04
	Retiree & Child(ren)	\$ 149.31	\$ 1,598.97	\$ 1,748.28
	Retiree & Spouse	\$ 306.89	\$ 2,071.70	\$ 2,378.58
	Family	\$ 455.39	\$ 2,517.26	\$ 2,972.65
Highmark Delaware Comprehensive PPO	Retiree Only	\$ -	\$ 836.26	\$ 1,313.69
	Spouse of Retiree Only	\$ 328.41	\$ 985.27	\$ 1,313.69
	Retiree & Child(ren)	\$ 177.36	\$ 1,845.81	\$ 2,023.17
	Retiree & Spouse	\$ 352.37	\$ 2,370.80	\$ 2,723.17
	Family	\$ 522.48	\$ 2,881.16	\$ 3,403.65
Aetna HMO	Retiree Only	\$ -	\$ 1,201.55	\$ 1,201.55
	Spouse of Retiree Only	\$ 300.39	\$ 901.15	\$ 1,201.55
	Retiree & Child(ren)	\$ 158.77	\$ 1,677.85	\$ 1,836.63
	Retiree & Spouse	\$ 332.21	\$ 2,198.17	\$ 2,530.37
	Family	\$ 488.78	\$ 2,667.87	\$ 3,156.65
Aetna CDH Gold	Retiree Only	\$ -	\$ 758.36	\$ 1,191.22
	Spouse of Retiree Only	\$ 297.80	\$ 893.43	\$ 1,191.22
	Retiree & Child(ren)	\$ 156.83	\$ 1,661.72	\$ 1,818.55
	Retiree & Spouse	\$ 318.95	\$ 2,148.06	\$ 2,467.01
	Family	\$ 485.54	\$ 2,647.84	\$ 3,133.38

City Pays 100% of Employee Only Coverage;

Retiree Pays 25% of Dependent Coverage & City Pays 75% of Dependent Coverage as follows:

- AFSCME** Union employees who retired prior to June 30, 2015
- DOE** Union employees who retired prior to May 31, 2013
- IBEW** Union employees who retired prior to July 1, 2014
- FOP** Union employees who retired prior to July 1, 2012
- Non-Bargaining** employees who retired prior to July 1, 2012