

2024 NPS Retiree Monthly Rates

MEDICAL	HSA1600	POS1000	POS750	PPO750 Out of Area (for out of state employees)
Member Only	\$670.10	\$684.97	\$706.34	\$857.14
Member + Child(ren)	\$1,118.65	\$1,142.48	\$1,176.71	\$1,418.14
Member + Spouse	\$1,638.74	\$1,672.94	\$1,722.08	\$2,069.00
Member + Family	\$2,532.87	\$2,584.90	\$2,659.69	\$3,187.87

DENTAL	EPO	LOW OPTION	HIGH OPTION
Member Only	\$22.46	\$22.94	\$33.42
Member + 1 Child	\$35.92	\$36.94	\$65.40
Member + Children	\$53.76	\$50.40	\$88.64
Member + Spouse	\$44.86	\$45.84	\$66.80
Member + Family	\$71.74	\$71.96	\$120.02

VISION	
Member Only	\$5.30
Member + One	\$9.30
Member + Children	\$10.62
Member + Family	\$15.44