



**State of Illinois Retiree Health Plan  
Total Retiree Advantage Illinois (TRAIL)  
Medicare Advantage Program (MAPD)**

**Monthly Health Plan Contribution Rates for Calendar Year 2018 (effective 01/01/2018)**

Open enrollment is typically October 15-November 16 with effective date of January 1.

The following charges apply to annuitants and survivors with less than 20 years of service:

Years of Service at Retirement	Member's Responsibility Percentage of Cost	HMO Plans		PPO Plan	
		(Humana, Coventry Advantra, and Health Alliance MAPD)	Total Rate=\$211.12	United Healthcare	Total Rate=\$259.70
1	95%	\$	200.56	\$	246.72
2	90%	\$	190.00	\$	233.72
3	85%	\$	179.44	\$	220.74
4	80%	\$	168.90	\$	207.76
5	75%	\$	158.34	\$	194.78
6	70%	\$	147.78	\$	181.78
7	65%	\$	137.22	\$	168.80
8	60%	\$	126.66	\$	155.82
9	55%	\$	116.12	\$	142.84
10	50%	\$	105.56	\$	129.84
11	45%	\$	95.00	\$	116.86
12	40%	\$	84.44	\$	103.88
13	35%	\$	73.88	\$	90.88
14	30%	\$	63.34	\$	77.90
15	25%	\$	52.78	\$	64.92
16	20%	\$	42.22	\$	51.94
17	15%	\$	31.66	\$	38.94
18	10%	\$	21.10	\$	25.96
19	5%	\$	10.56	\$	12.98
20+	0%	\$	-	\$	-

See other side for Dependent, Dental, and Life Insurance rates.

## Dependent Monthly Health Plan Contributions \*

\*The monthly dependent contribution is in addition to the employee health contribution. **You and all of your covered dependents must enroll in both Medicare Parts A and B to qualify for the Medicare Advantage Plans.** Dependents must be enrolled in the same plan as the member.

## Dependent Monthly Health Plan Contributions

Health Plan Name	One Dependent	Two or more Dependents
Coventry Advantra (An Aetna Company)	\$ 89.91	\$ 126.00
Health Alliance MAPD	\$ 89.91	\$ 126.00
Humana HMO	\$ 89.91	\$ 126.00
United Healthcare PPO	\$ 110.00	\$ 155.00

## Member Monthly Quality Care Dental Plan (QCDP) Contributions\*

Member Only	\$ 11.00
Member plus 1 Dependent	\$ 17.00
Member plus 2 or more Dependents	\$ 19.50

## Member and Dependents

Prescription: Currently no additional contribution  
 Vision: Currently no additional contribution

## Monthly Optional Term Life Insurance Contributions

Monthly Rate per \$1,000

Under 30	\$0.06
Ages 30 - 34	\$0.08
Ages 35 - 44	\$0.10
Ages 45 - 49	\$0.16
Ages 50 - 54	\$0.24
Ages 55 - 59	\$0.44
Ages 60 - 64	\$0.66
Ages 65 - 69	\$1.28
Ages 70 and above	\$2.06

Accidental Death & Dismemberment \$0.02

Spouse Life (\$5,000)\* \$3.00  
 Dependent Children (\$10,000 coverage) \$0.70

\* Spouse life coverage will reduce to \$5,000 when an annuitant turns age 60. However, child life coverage will remain at \$10,000 for both active members and eligible annuitants.

## Life Insurance

### Retire Before Age 60

Amount=last Annual Salary (until age 60)  
 Can Purchase up to 8 times a member's salary  
 Pay a premium for the optional life insurance  
 Refer to above chart for rates

### Retire Age 60 or after

Amount=\$5,000 (Free from the State of Illinois)  
 Can Purchase up to 4 times State-paid amount  
 Pay a premium for the optional life insurance  
 Refer to above chart for rates

More information regarding the 2018 State of Illinois Group Insurance Program TRAIL is available at:

[www.MyBenefits.illinois.gov](http://www.MyBenefits.illinois.gov)  
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