



2025 RETIREE OPEN ENROLLMENT October 21st – November 1st, 2024

What's changing effective January 1, 2025?

Medical

- 7.5% increase to monthly medical premiums
- **NEW** – 24/7 Virtual Visits will be offered through United Healthcare for a \$10 co-pay

Dental

- The monthly premiums for the dental plans will decrease, depending on the plan, the decrease range is from 1.6% to 3.9%

Vision

- Vision provider will change from EyeMed to Humana
- 5.1% decrease to monthly premiums
- Co-pay for standard progressive lenses will decrease from \$70 to \$30
- Frame allowance will increase from \$120 to \$130
- Conventional contact lenses allowance will increase from \$105 to \$130

Life Insurance

- No change

Wellness Program

- Enhanced Wellness Program in 2025
- Reminder, retirees enrolled in a COL medical plan are eligible to utilize the city's recreation facilities at no cost

Medical Insurance Premiums	United Healthcare 24 Deductions											
	Plan A			Plan C			Plan D			Plan EPO		
	Retiree No Medicare	Retiree With Medicare	Retiree & Spouse with Medicare	Retiree No Medicare	Retiree With Medicare	Retiree & Spouse with Medicare	Retiree No Medicare	Retiree With Medicare	Retiree & Spouse with Medicare	Retiree No Medicare	Retiree With Medicare	Retiree & Spouse with Medicare
Tier of Coverage	Retiree Cost											
Retiree Only	\$547.88	\$356.06	-	\$531.44	\$345.37	-	\$301.40	\$190.21	-	\$587.92	\$382.15	-
Retiree + Spouse	\$1,177.99	\$1,039.38	\$570.91	\$1,142.63	\$1,008.17	\$515.14	\$648.05	\$557.33	\$282.91	\$1,263.99	\$1,070.67	\$543.46
Retiree + Child(ren)	\$1,041.04	\$957.82	-	\$1,009.77	\$929.06	-	\$572.71	\$492.53	-	\$1,117.02	\$960.62	-
Retiree + Family	\$1,232.92	\$1,101.24	\$656.93	\$1,195.89	\$1,068.16	\$553.78	\$731.63	\$629.20	\$314.61	\$1,358.77	\$1,168.52	\$584.24

Dental Insurance Premiums	Humana 24 Deductions			
	DHMO Plan	Advantage Plus Plan	Mid DPPO Plan	High DPPO Plan
Tier of Coverage	Retiree Cost			
Retiree Only	\$5.64	\$8.58	\$11.39	\$16.31
Retiree + One	\$10.62	\$16.73	\$20.06	\$28.75
Retiree + Family	\$14.37	\$28.47	\$31.28	\$44.77

Vision Insurance Premiums	Humana Vision 130 Plan 24 Deductions
	Retiree Cost
Retiree Only	\$2.61
Retiree + One	\$5.19
Retiree + Family	\$7.29

Retired Police and Fire premiums are based on a monthly amount or two (2) times the amount shown.

Important Reminders

- Contact Risk Benefits to update your beneficiary designation(s), address, phone number and email address, if needed.
- Only eligible dependents should be enrolled; such as legal spouse and children up to the age limit, unless disabled.
- Anyone electing the DHMO dental plan for 2025 must contact Humana in January to select a primary dental provider.
- **All changes go into effect on January 1, 2025.**

If you have any questions, please do not hesitate to contact Risk Benefits at benefits@lakelandgov.net or by calling (863) 834-6797. Thank you.