

**CITY OF SEATTLE**  
**"Most" Retirees**  
**2021 Monthly Rates**

|  | Under Age 65  | Disability<br>Medicare Eligible<br>Under Age 65 | Medicare Eligible<br>65 and Over |
|--|---------------|---|----------------------------------|
| <b>City of Seattle Traditional</b>                           |               |   |                                  |
| Retiree  | \$1,225.27    | \$495.11  | Not Available                    |
| Spouse / Domestic Partner                                    | \$1,103.88    | \$448.19  | Not Available                    |
| 1st Child under age 26                                       | \$355.95      | Not Available                                   | Not Available                    |
| <b>All</b> Additional Children (not each child) under age 26 | \$275.76      | Not Available                                   | Not Available                    |
| <b>Each</b> disabled child past the limiting age             | \$526.99      | Not Available                                   | Not Available                    |
| <b>City of Seattle Preventive</b>                            |               |   |                                  |
| Retiree  | \$1,322.51    | \$533.43  | Not Available                    |
| Spouse / Domestic Partner                                    | \$1,188.27    | \$481.50  | Not Available                    |
| 1st Child under age 26                                       | \$361.63      | Not Available                                   | Not Available                    |
| <b>All</b> Additional Children (not each child) under age 26 | \$273.09      | Not Available                                   | Not Available                    |
| <b>Each</b> disabled child past the limiting age             | \$550.19      | Not Available                                   | Not Available                    |
| <b>Kaiser Permanente Standard</b>                            |               |   |                                  |
| Retiree  | \$603.19      | Coverage available under KP MAPD 3 & 4          |                                  |
| Spouse / Domestic Partner                                    | \$603.19      | Coverage available under KP MAPD 3 & 4          |                                  |
| 1st Child under age 26                                       | \$351.30      | Not Available                                   | Not Available                    |
| <b>Each</b> Additional Child under age 26                    | \$324.58      | Not Available                                   | Not Available                    |
| <b>Each</b> disabled child past the limiting age             | \$351.30      | Not Available                                   | Not Available                    |
| <b>Kaiser Permanente Deductible</b>                          |               |   |                                  |
| Retiree  | \$554.91      | Coverage available under KP MAPD 3 & 4          |                                  |
| Spouse / Domestic Partner                                    | \$554.91      | Coverage available under KP MAPD 3 & 4          |                                  |
| 1st Child under age 26                                       | \$323.20      | Not Available                                   | Not Available                    |
| <b>Each</b> Additional Child under age 26                    | \$298.58      | Not Available                                   | Not Available                    |
| <b>Each</b> disabled child past the limiting age             | \$323.20      | Not Available                                   | Not Available                    |
| <b>United Healthcare Medicare Complete HMO</b>               |               |   |                                  |
| HMO (each enrollee)  | Not Available | Not Available                                   | \$373.45                         |
| <b>Aetna Medicare Plan (PPO)</b>                             |               |   |                                  |
| Washington State Resident                                    | Not Available | Not Available                                   | \$297.84                         |
| Non-Washington State Resident                                | Not Available | Not Available                                   | \$317.34                         |
| <b>Kaiser Permanente Medicare HMO</b>                        |               |   |                                  |
| Medicare Advantage Plan 3 (KP MAPD 3) each enrollee          | Not Available | \$427.70  | \$427.70                         |
| Medicare Advantage Plan 4 (KP MAPD 4) each enrollee          | Not Available | \$408.12  | \$408.12                         |

Updated 10/8/2020