

# Benefits Cost Worksheet for Retired Employees

## PLAN YEAR 2015-2016

**This is NOT an enrollment form.** You must enroll online using *My UT Benefits* during Annual Enrollment or, for new Retired Employees through your institution's Benefits Office.

Please remember that this form only provides you (the subscriber) with an estimate of your total out-of-pocket cost per month based on state-appropriated funds and contracted premium rates. Be sure to review available benefits materials for more information on the plans listed.

**For each section, figure the correct cost and enter it in the TOTAL boxes to the right of each section.**

MEDICAL OUT-OF-POCKET COST PER MONTH					BLUE CROSS BLUE SHIELD OF TEXAS
Plan Available – Worldwide	Subscriber Only	Subscriber & Spouse	Subscriber & Child(ren)	Subscriber & Family	MEDICAL TOTAL
UT SELECT	\$0	\$244.10	\$255.30	\$480.71	
Medical Plan Rates include: Prescription benefit coverage + \$6,000 Life					\$

TOBACCO PREMIUM PROGRAM (TPP)					
Tobacco User(s)	Non-user	Subscriber	Spouse	Child(ren)	TPP TOTAL <sup>2</sup>
Tobacco User(s) Cost	\$0	\$30.00	\$30.00	\$30.00 <sup>1</sup>	\$

<sup>1</sup> Maximum cost of \$30 per month regardless of how many covered dependent children use tobacco.

<sup>2</sup> Maximum cost per family is \$90 per month.

DENTAL OUT-OF-POCKET COST PER MONTH					DELTA DENTAL	
Plans Available	Subscriber Only	Subscriber & Spouse	Subscriber & Child(ren)	Subscriber & Family	DENTAL TOTAL	
NATIONWIDE						
UT SELECT Dental	\$32.40	\$61.51	\$67.80	\$96.40		
UT SELECT Dental Plus	\$55.85	\$106.06	\$117.03	\$166.74		
CERTAIN AREAS IN TEXAS						
DeltaCare Dental HMO	\$8.89	\$16.90	\$18.68	\$26.67	\$	

VISION OUT-OF-POCKET COST PER MONTH					SUPERIOR VISION	
Plans Available	Subscriber Only	Subscriber & Spouse	Subscriber & Child(ren)	Subscriber & Family	VISION TOTAL	
Superior Vision	\$5.90	\$9.30	\$9.52	\$15.10		
Superior Vision Plus	\$9.00	\$14.08	\$15.08	\$21.30		\$

**LIFE OUT-OF-POCKET COST PER MONTH**

**DEARBORN NATIONAL**

<p><b>Enter Elected Coverage Amount:</b>                  Select from the following options and enter here (see<sup>1</sup> below).                  \$7,000                  \$10,000                  \$25,000                  \$50,000                  Note: For those Retired Employees of the UT System who retired through the 1993 one-time retirement option, enter the amount of coverage currently in place.</p>	<b>A</b>	
<p>Divide total in A by 1,000 to determine units of \$1,000 for premium calculation. Enter here.</p>	<b>B</b>	
<p>Refer to <b>Retiree Rate Chart</b> below. Enter the rate that corresponds with your age on September 1, 2015.</p>	<b>C</b>	
<p>To determine the premium cost per month, multiply <b>B x C</b>.</p>	<b>D</b>	

The remainder of the Life Out-of-Pocket calculation section relates to the eligible spouse of a Retired Employee. Dependent children of Retirees are not eligible for Life coverage.

<p>If you are electing the \$3,000 Family Coverage option, enter \$1.83 (see <sup>2</sup> below). Otherwise, enter zero.</p>	<b>E</b>	
<p>To determine total Life premium cost per month, add <b>D + E</b>. Otherwise, enter zero.</p>	<b>LIFE TOTAL</b>	<b>\$</b>

RETIREE RATE CHART	
AGE OF SUBSCRIBER ON 9/01/15	RATE PER \$1,000 COVERAGE
< 35	\$0.038
35 - 39	\$0.048
40 - 44	\$0.065
45 -49	\$0.100
50 -54	\$0.155
55 -59	\$0.240
60 -64	\$0.375
65 -69	\$0.670
70 and over	\$0.752

<sup>1</sup> If you are increasing your Life coverage amount, Evidence of Insurability (EOI) is required.  
<sup>2</sup> To elect Spouse Life coverage, EOI may be required. Contact your institution Benefits Office for assistance.

**LONG TERM CARE (LTC) OUT-OF-POCKET COST PER MONTH \***

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AGE	PLAN A					PLAN B					
	Basic Benefit with Guaranteed Benefit Increase Option					Basic Benefit with Lifetime Automatic Benefit Increase Option (Inflation Protection)					
	\$100 BENEFIT	\$125 BENEFIT	\$150 BENEFIT	\$200 BENEFIT	\$250 BENEFIT	\$100 BENEFIT	\$125 BENEFIT	\$150 BENEFIT	\$200 BENEFIT	\$250 BENEFIT	
<=24	6.46	8.07	9.69	12.92	16.15	40.73	50.92	61.10	81.47	101.83	
25	6.78	8.47	10.16	13.55	16.94	41.43	51.78	62.14	82.85	103.57	
26	6.96	8.71	10.45	13.93	17.41	42.20	52.76	63.31	84.41	105.51	
27	7.21	9.01	10.81	14.41	18.02	43.35	54.19	65.03	86.70	108.38	
28	7.49	9.36	11.23	14.97	18.71	44.79	55.99	67.19	89.59	111.99	
29	7.80	9.75	11.70	15.60	19.50	46.54	58.18	69.82	93.09	116.36	
30	8.13	10.17	12.20	16.27	20.33	48.49	60.61	72.73	96.97	121.22	
31	8.51	10.64	12.77	17.02	21.28	50.73	63.41	76.09	101.45	126.81	
32	8.91	11.14	13.37	17.83	22.29	53.13	66.42	79.70	106.27	132.83	
33	9.35	11.68	14.02	18.69	23.37	55.67	69.58	83.50	111.33	139.16	
34	9.83	12.29	14.75	19.66	24.58	58.43	73.04	87.65	116.86	146.08	
35	10.35	12.94	15.53	20.70	25.88	61.28	76.59	91.91	122.55	153.19	
36	10.92	13.65	16.37	21.83	27.29	64.17	80.22	96.26	128.35	160.43	
37	11.53	14.41	17.29	23.05	28.81	67.03	83.79	100.55	134.07	167.58	
38	12.16	15.20	18.24	24.32	30.41	69.69	87.11	104.54	139.38	174.23	
39	12.83	16.04	19.24	25.66	32.07	72.18	90.22	108.27	144.36	180.44	
40	13.50	16.88	20.25	27.01	33.76	74.35	92.93	111.52	148.69	185.87	
41	14.23	17.78	21.34	28.45	35.56	76.46	95.58	114.69	152.92	191.15	
42	14.98	18.73	22.47	29.96	37.45	78.41	98.01	117.61	156.81	196.02	
43	15.81	19.77	23.72	31.63	39.53	80.46	100.57	120.69	160.91	201.14	
44	16.70	20.88	25.06	33.41	41.76	82.50	103.12	123.75	165.00	206.25	
45	17.69	22.11	26.54	35.38	44.23	84.74	105.93	127.12	169.49	211.86	
46	18.78	23.48	28.17	37.56	46.95	87.22	109.02	130.83	174.44	218.05	
47	19.96	24.95	29.94	39.92	49.90	89.95	112.43	134.92	179.89	224.87	
48	21.16	26.45	31.74	42.32	52.90	92.43	115.54	138.64	184.85	231.07	
49	22.34	27.93	33.52	44.69	55.86	94.42	118.03	141.64	188.85	236.06	
50	23.52	29.40	35.28	47.03	58.79	95.97	119.96	143.96	191.94	239.93	
51	24.78	30.97	37.16	49.55	61.94	97.49	121.87	146.24	194.98	243.73	
52	26.13	32.66	39.20	52.26	65.33	99.01	123.76	148.51	198.01	247.52	
53	27.65	34.56	41.47	55.29	69.12	100.80	126.00	151.20	201.60	252.00	
54	29.41	36.76	44.11	58.82	73.52	103.10	128.88	154.66	206.21	257.76	
55	31.41	39.26	47.11	62.81	78.51	105.87	132.34	158.80	211.74	264.67	
56	33.72	42.15	50.58	67.44	84.30	109.39	136.73	164.08	218.77	273.46	
57	36.40	45.50	54.60	72.81	91.01	113.76	142.20	170.64	227.52	284.40	
58	39.18	48.97	58.77	78.36	97.94	118.12	147.65	177.18	236.24	295.30	
59	41.83	52.29	62.75	83.67	104.59	121.78	152.23	182.67	243.56	304.45	
60	44.50	55.63	66.76	89.01	111.26	125.19	156.49	187.79	250.38	312.97	
61	47.40	59.25	71.10	94.80	118.51	128.98	161.23	193.47	257.96	322.46	
62	50.61	63.26	75.91	101.21	126.51	133.19	166.49	199.79	266.38	332.98	
63	54.36	67.95	81.54	108.72	135.89	138.45	173.06	207.67	276.90	346.12	
64	58.71	73.39	88.07	117.43	146.78	144.79	180.98	217.18	289.57	361.97	
65	63.88	79.85	95.82	127.76	159.70	152.42	190.52	228.62	304.83	381.04	
66	70.06	87.57	105.08	140.11	175.14	161.69	202.11	242.53	323.38	404.22	
67	77.28	96.61	115.93	154.57	193.21	172.42	215.53	258.63	344.84	431.05	
68	85.58	106.97	128.37	171.16	213.94	184.42	230.52	276.63	368.84	461.05	
69	94.85	118.56	142.28	189.70	237.13	197.29	246.61	295.94	394.58	493.23	
70	104.87	131.09	157.31	209.74	262.18	210.48	263.09	315.71	420.95	526.19	
71	115.65	144.56	173.48	231.30	289.13	223.90	279.87	335.85	447.80	559.75	
72	127.12	158.90	190.68	254.24	317.80	237.46	296.82	356.19	474.91	593.64	
73	139.35	174.19	209.03	278.70	348.37	251.25	314.06	376.87	502.50	628.12	
74	152.03	190.03	228.04	304.06	380.07	264.83	331.04	397.25	529.67	662.08	
75	165.21	206.51	247.81	330.42	413.02	278.38	347.97	417.57	556.76	695.95	
76	178.99	223.74	268.49	357.98	447.48	292.29	365.37	438.44	584.59	730.73	
77	193.00	241.25	289.50	386.00	482.50	306.10	382.63	459.15	612.20	765.25	
78	207.92	259.90	311.88	415.85	519.81	321.45	401.81	482.17	642.90	803.62	
79	223.65	279.56	335.48	447.30	559.12	338.16	422.70	507.24	676.32	845.40	
80	240.40	300.50	360.59	480.79	600.99	356.75	445.94	535.12	713.50	891.87	
81	257.50	321.88	386.26	515.01	643.76	375.96	469.94	563.93	751.91	939.89	
82	275.24	344.05	412.86	550.48	688.11	396.35	495.44	594.52	792.70	990.87	
83	293.20	366.50	439.81	586.41	733.01	416.64	520.80	624.96	833.28	1041.60	
84	310.87	388.58	466.30	621.74	777.17	436.46	545.57	654.69	872.92	1091.14	
85	328.62	410.78	492.94	657.25	821.56	455.80	569.75	683.70	911.60	1139.50	
86	345.99	432.49	518.98	691.98	864.97	473.66	592.07	710.49	947.32	1184.15	
87	362.76	453.45	544.14	725.51	906.89	489.00	611.25	733.50	977.99	1222.49	
88	378.91	473.64	568.37	757.83	947.28	502.44	628.05	753.66	1004.88	1256.10	
89	395.56	494.45	593.34	791.12	988.90	515.41	644.27	773.12	1030.82	1288.53	
90	412.23	515.29	618.34	824.46	1030.57	528.07	660.08	792.10	1056.13	1320.17	
											<b>LTC TOTAL</b>
											<b>\$</b>

\* EOI is required.

**ESTIMATED TOTAL MONTHLY OUT-OF-POCKET**  
(Add ALL boxes and enter total)

**\$**