## 2024 Benefits Premiums

Plan A (Pension Plan) Retirees

|  | Your monthly cost | LCRA's monthly cost | Total monthly cost |
| :---: | :---: | :---: | :---: |
| UHC Choice Plus* |  |  |  |
| Retiree only | \$389.66 | \$696.52 | \$1,086.18 |
| Retiree + spouse | \$1,529.95 | \$795.93 | \$2,325.88 |
| Retiree + child(ren) | \$1,345.01 | \$763.56 | \$2,108.57 |
| Retiree + family | \$2,000.42 | \$1,236.84 | \$3,237.26 |
| Dental-Guardian |  |  |  |
| Retiree only | \$40.21 | \$0.00 | \$40.21 |
| Retiree + spouse | \$80.91 | \$0.00 | \$80.91 |
| Retiree + child(ren) | \$88.37 | \$0.00 | \$88.37 |
| Retiree + family | \$129.06 | \$0.00 | \$129.06 |
| Vision - EyeMed Enhanced Plan |  |  |  |
| Retiree only | \$7.10 | \$0.00 | \$7.10 |
| Retiree + spouse | \$15.26 | \$0.00 | \$15.26 |
| Retiree + child(ren) | \$11.50 | \$0.00 | \$11.50 |
| Retiree + family | \$20.95 | \$0.00 | \$20.95 |
| Vision - EyeMed Standard Plan |  |  |  |
| Retiree only | \$5.27 | \$0.00 | \$5.27 |
| Retiree + spouse | \$11.33 | \$0.00 | \$11.33 |
| Retiree + child(ren) | \$8.53 | \$0.00 | \$8.53 |
| Retiree + family | \$15.56 | \$0.00 | \$15.56 |
| Legal - ARAG Ultimate Advisor Plus |  |  |  |
| Retiree only | \$15.38 | \$0.00 | \$15.38 |
| Retiree + family | \$20.30 | \$0.00 | \$20.30 |
| Legal - ARAG Ultimate Advisor |  |  |  |
| Retiree only | \$9.38 | \$0.00 | \$9.38 |
| Retiree + family | \$12.38 | \$0.00 | \$12.38 |

The 2024 rates and benefits plans take effect Jan. 1, 2024.
A covered spouse and/or child(ren) of a retiree may remain on the plan until the spouse reaches age 65 and/or the child(ren) turn age 26 . Once the retiree is no longer eligible, a spouse will be enrolled at the retiree only rate or retiree + child(ren) rate, if covering dependent(s).
*available to retirees under age 65.

