

Fulton County
2023 VS 2022 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
ACTIVE EMPLOYEES		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness	
BCBS HSA																
Employee	\$681.45	\$545.16	\$565.16	\$136.29	\$116.29	\$708.74	\$566.99	\$586.99	\$141.75	\$121.75	\$27.29	\$21.83	\$21.83	\$5.46	\$5.46	4.0%
Employee + 1	\$1,302.61	\$1,042.09	\$1,062.09	\$260.52	\$240.52	\$1,354.78	\$1,083.82	\$1,103.82	\$270.96	\$250.96	\$52.17	\$41.73	\$41.73	\$10.43	\$10.43	4.0%
Family	\$1,698.20	\$1,358.56	\$1,378.56	\$339.64	\$319.64	\$1,766.20	\$1,412.96	\$1,432.96	\$353.24	\$333.24	\$68.01	\$54.40	\$54.40	\$13.60	\$13.60	4.0%
Kaiser HMO																
Employee	\$605.52	\$484.42	\$504.42	\$121.10	\$101.10	\$638.24	\$510.59	\$530.59	\$127.65	\$107.65	\$32.72	\$26.17	\$26.17	\$6.55	\$6.55	5.4%
Employee + 1	\$1,157.52	\$926.02	\$946.02	\$231.50	\$211.50	\$1,220.06	\$976.05	\$996.05	\$244.01	\$224.01	\$62.54	\$50.03	\$50.03	\$12.51	\$12.51	5.4%
Family	\$1,509.02	\$1,207.22	\$1,227.22	\$301.80	\$281.80	\$1,590.55	\$1,272.44	\$1,292.44	\$318.11	\$298.11	\$81.53	\$65.22	\$65.22	\$16.31	\$16.31	5.4%
BCBS POS																
Employee	\$869.79	\$652.35	\$672.35	\$217.45	\$197.45	\$904.63	\$678.47	\$698.47	\$226.16	\$206.16	\$34.83	\$26.12	\$26.12	\$8.71	\$8.71	4.0%
Employee + 1	\$1,605.32	\$1,203.99	\$1,223.99	\$401.33	\$381.33	\$1,669.61	\$1,252.21	\$1,272.21	\$417.40	\$397.40	\$64.29	\$48.22	\$48.22	\$16.07	\$16.07	4.0%
Family	\$2,178.27	\$1,633.70	\$1,653.70	\$544.57	\$524.57	\$2,265.50	\$1,699.13	\$1,719.13	\$566.37	\$546.37	\$87.23	\$65.43	\$65.43	\$21.81	\$21.81	4.0%
BCBS HMO																
Employee	\$763.50	\$610.80	\$630.80	\$152.70	\$132.70	\$794.08	\$635.26	\$655.26	\$158.82	\$138.82	\$30.58	\$24.46	\$24.46	\$6.12	\$6.12	4.0%
Employee + 1	\$1,409.14	\$1,127.32	\$1,147.32	\$281.83	\$261.83	\$1,465.58	\$1,172.46	\$1,192.46	\$293.12	\$273.12	\$56.43	\$45.14	\$45.14	\$11.29	\$11.29	4.0%
Family	\$1,912.08	\$1,529.66	\$1,549.66	\$382.42	\$362.42	\$1,988.65	\$1,590.92	\$1,610.92	\$397.73	\$377.73	\$76.57	\$61.26	\$61.26	\$15.31	\$15.31	4.0%

Fulton County
2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness	
2004 & EARLIER RETIREES																
UNDER 65																
BCBS HSA																
Employee	\$1,013.98	\$912.59	\$932.59	\$101.40	\$81.40	\$1,054.59	\$949.13	\$969.13	\$105.46	\$85.46	\$40.61	\$36.54	\$36.54	\$4.06	\$4.06	4.0%
Employee + 1	\$1,938.35	\$1,744.51	\$1,764.51	\$193.83	\$173.83	\$2,015.97	\$1,814.37	\$1,834.37	\$201.60	\$181.60	\$77.62	\$69.86	\$69.86	\$7.77	\$7.77	4.0%
Family	\$2,586.18	\$2,327.56	\$2,347.56	\$258.62	\$238.62	\$2,689.75	\$2,420.77	\$2,440.77	\$268.98	\$248.98	\$103.57	\$93.21	\$93.21	\$10.36	\$10.36	4.0%
Kaiser HMO																
Employee	\$820.58	\$738.52	\$758.52	\$82.06	\$62.06	\$864.92	\$778.43	\$798.43	\$86.49	\$66.49	\$44.34	\$39.91	\$39.91	\$4.43	\$4.43	5.4%
Employee + 1	\$1,568.63	\$1,411.77	\$1,431.77	\$156.86	\$136.86	\$1,653.38	\$1,488.04	\$1,508.04	\$165.34	\$145.34	\$84.75	\$76.27	\$76.27	\$8.48	\$8.48	5.4%
Family	\$2,094.78	\$1,885.30	\$1,905.30	\$209.48	\$189.48	\$2,207.97	\$1,987.17	\$2,007.17	\$220.80	\$200.80	\$113.19	\$101.87	\$101.87	\$11.32	\$11.32	5.4%
2004 Kaiser RET W/MADV SP	\$1,049.77	\$944.79	\$964.79	\$104.98	\$84.98	\$1,102.60	\$992.34	\$1,012.34	\$110.26	\$90.26	\$52.83	\$47.55	\$47.55	\$93.31	\$73.31	5.0%
Kaiser HMO Split Plans	\$995.95	\$896.36	\$916.36	\$99.60	\$79.60	\$1,040.29	\$936.26	\$956.26	\$104.03	\$84.03	\$44.34	\$39.91	\$39.91	\$93.31	\$73.31	4.5%
RET w/Kaiser & overage HMO Med Dep-06	\$995.95	\$896.36	\$916.36	\$99.60	\$79.60	\$1,040.29	\$936.26	\$956.26	\$104.03	\$84.03	\$44.34	\$39.91	\$39.91	\$93.31	\$73.31	4.5%
BCBS POS																
Employee	\$1,294.15	\$1,164.73	\$1,184.73	\$129.41	\$109.41	\$1,345.97	\$1,211.37	\$1,231.37	\$134.60	\$114.60	\$51.83	\$46.64	\$46.64	\$5.19	\$5.19	4.0%
Employee + 1	\$2,388.72	\$2,149.85	\$2,169.85	\$238.87	\$218.87	\$2,484.38	\$2,235.94	\$2,255.94	\$248.44	\$228.44	\$95.66	\$86.09	\$86.09	\$9.57	\$9.57	4.0%
Family	\$3,241.09	\$2,916.98	\$2,936.98	\$324.11	\$304.11	\$3,370.88	\$3,033.79	\$3,053.79	\$337.09	\$317.09	\$129.79	\$116.81	\$116.81	\$12.98	\$12.98	4.0%
2004 POS RET W/MADV SP	\$1,523.34	\$1,371.00	\$1,391.00	\$152.33	\$132.33	\$1,583.65	\$1,425.28	\$1,445.28	\$158.37	\$138.37	\$60.32	\$54.28	\$54.28	\$6.04	\$6.04	4.0%
2004 POS RET W/HMO MED SP	\$2,098.97	\$1,889.08	\$1,909.08	\$209.90	\$189.90	\$2,183.03	\$1,964.72	\$1,984.72	\$218.31	\$198.31	\$84.06	\$75.64	\$75.64	\$8.41	\$8.41	4.0%
2004 POS RET W/IND MED SP	\$1,909.75	\$1,657.21	\$1,677.21	\$252.53	\$232.53	\$1,986.23	\$1,723.57	\$1,743.57	\$262.66	\$242.66	\$76.48	\$66.36	\$66.36	\$10.12	\$10.12	4.0%
BCBS HMO																
Employee	\$1,136.05	\$1,022.44	\$1,042.44	\$113.60	\$93.60	\$1,181.54	\$1,063.39	\$1,083.39	\$118.15	\$98.15	\$45.49	\$40.95	\$40.95	\$4.55	\$4.55	4.0%
Employee + 1	\$2,096.82	\$1,887.14	\$1,907.14	\$209.68	\$189.68	\$2,180.79	\$1,962.71	\$1,982.71	\$218.08	\$198.08	\$83.97	\$75.57	\$75.57	\$8.40	\$8.40	4.0%
Family	\$2,845.16	\$2,560.64	\$2,580.64	\$284.52	\$264.52	\$2,959.10	\$2,663.19	\$2,683.19	\$295.91	\$275.91	\$113.94	\$102.55	\$102.55	\$11.39	\$11.39	4.0%
OVER 65																
Kaiser Senior Advantage Plan																
REE-Only	\$175.37	\$157.83	\$0.00	\$17.54	\$0.00	\$175.37	\$157.83	\$0.00	\$17.54	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
REE+1	\$350.74	\$315.67	\$0.00	\$35.07	\$0.00	\$350.74	\$315.67	\$0.00	\$35.07	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
Family	\$526.11	\$473.50	\$0.00	\$52.61	\$0.00	\$526.11	\$473.50	\$0.00	\$52.61	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
SR REE + 1 U65 KP HMO DEP	\$995.95	\$896.36	\$0.00	\$99.60	\$0.00	\$1,040.29	\$936.26	\$0.00	\$104.03	\$0.00	\$44.34	\$39.91		\$4.43		4.5%
REE U65 KP HMO + SR DEP	\$995.95	\$896.36	\$0.00	\$99.60	\$0.00	\$1,040.29	\$936.26	\$0.00	\$104.03	\$0.00	\$44.34	\$39.91		\$93.31		4.5%
Aetna Medicare Advantage - Base																
REE-Only	\$229.19	\$206.27	\$0.00	\$22.92	\$0.00	\$237.68	\$213.91	\$0.00	\$23.77	\$0.00	\$8.49	\$7.64		\$0.85		3.7%
REE+1	\$458.38	\$412.54	\$0.00	\$45.84	\$0.00	\$475.36	\$427.82	\$0.00	\$47.54	\$0.00	\$16.98	\$15.28		\$1.70		3.7%
Family	\$687.57	\$618.81	\$0.00	\$68.76	\$0.00	\$713.04	\$641.74	\$0.00	\$71.30	\$0.00	\$25.47	\$22.93		\$2.54		3.7%
MA REE+SP+1 U65 HMO Dep	\$1,594.43	\$1,434.99	\$0.00	\$159.44	\$0.00	\$1,656.90	\$1,491.21	\$0.00	\$165.69	\$0.00	\$62.47	\$56.22		\$6.25		3.9%
MA REE+SP+2 U65 HMO Deps	\$2,555.20	\$2,299.68	\$0.00	\$255.52	\$0.00	\$2,656.15	\$2,390.53	\$0.00	\$265.62	\$0.00	\$100.95	\$90.85		\$10.10		4.0%
MA REE+1 U65 HMO Dep	\$1,365.24	\$1,228.72	\$0.00	\$136.52	\$0.00	\$1,419.22	\$1,277.30	\$0.00	\$141.92	\$0.00	\$53.98	\$48.58		\$5.40		4.0%
MA REE+2 U65 HMO Deps	\$2,326.01	\$2,093.41	\$0.00	\$232.60	\$0.00	\$2,418.47	\$2,176.62	\$0.00	\$241.85	\$0.00	\$92.46	\$83.21		\$9.25		4.0%
MA SP+U65 HMO REE	\$1,365.24	\$1,228.72	\$0.00	\$136.52	\$0.00	\$1,419.22	\$1,277.30	\$0.00	\$141.92	\$0.00	\$53.98	\$48.58		\$5.40		4.0%
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,326.01	\$2,093.41	\$0.00	\$232.60	\$0.00	\$2,418.47	\$2,176.62	\$0.00	\$241.85	\$0.00	\$92.46	\$83.21		\$9.25		4.0%
MA SP+O65 Ind REE	\$844.79	\$698.75	\$0.00	\$146.04	\$0.00	\$877.94	\$726.11	\$0.00	\$151.83	\$0.00	\$33.14	\$27.36		\$5.79		3.9%
MA REE+1 U65 POS Dep	\$1,523.34	\$1,371.00	\$0.00	\$152.33	\$0.00	\$1,583.65	\$1,425.28	\$0.00	\$158.37	\$0.00	\$60.32	\$54.28		\$6.04		4.0%
MA REE+2 U65 POS Dep	\$2,617.91	\$2,356.12	\$0.00	\$261.79	\$0.00	\$2,722.06	\$2,449.85	\$0.00	\$272.21	\$0.00	\$104.15	\$93.73		\$10.42		4.0%
MA REE+SP+1 U65 POS Dep	\$1,752.53	\$1,577.27	\$0.00	\$175.25	\$0.00	\$1,821.33	\$1,639.19	\$0.00	\$182.14	\$0.00	\$68.81	\$61.92		\$6.89		3.9%
Enhanced Aetna Medicare Advantage - Buy-up																
REE-Only	\$267.77	\$206.27	\$0.00	\$61.50	\$0.00	\$280.34	\$213.91	\$0.00	\$66.43	\$0.00	\$12.57	\$7.64		\$4.93		4.7%
REE+1	\$535.54	\$412.54	\$0.00	\$123.00	\$0.00	\$560.68	\$427.82	\$0.00	\$132.86	\$0.00	\$25.14	\$15.28		\$9.86		4.7%
Family	\$803.31	\$618.81	\$0.00	\$184.50	\$0.00	\$841.02	\$641.74	\$0.00	\$199.28	\$0.00	\$37.71	\$22.93		\$14.78		4.7%
MA REE+SP+1 U65 HMO Dep	\$1,671.59	\$1,434.99	\$0.00	\$236.60	\$0.00	\$1,742.22	\$1,491.21	\$0.00	\$251.01	\$0.00	\$70.63	\$56.22		\$14.41		4.2%
MA REE+SP+2 U65 HMO Deps	\$2,632.36	\$2,299.68	\$0.00	\$332.68	\$0.00	\$2,741.47	\$2,390.53	\$0.00	\$350.94	\$0.00	\$109.11	\$90.85		\$18.26		4.1%

2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness	
MA REE+1 U65 HMO Dep	\$1,403.82	\$1,228.72	\$0.00	\$175.10	\$0.00	\$1,461.88	\$1,277.30	\$0.00	\$184.58	\$0.00	\$58.06	\$48.58		\$9.48		4.1%
MA REE+2 U65 HMO Deps	\$2,364.59	\$2,093.41	\$0.00	\$271.18	\$0.00	\$2,461.13	\$2,176.62	\$0.00	\$284.51	\$0.00	\$96.54	\$83.21		\$13.33		4.1%
MA SP+U65 HMO REE	\$1,403.82	\$1,228.72	\$0.00	\$175.10	\$0.00	\$1,461.88	\$1,277.30	\$0.00	\$184.58	\$0.00	\$58.06	\$48.58		\$9.48		4.1%
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,364.59	\$2,093.41	\$0.00	\$271.18	\$0.00	\$2,461.13	\$2,176.62	\$0.00	\$284.51	\$0.00	\$96.54	\$83.21		\$13.33		4.1%
MA SP+O65 Ind REE	\$883.37	\$698.75	\$0.00	\$184.62	\$0.00	\$920.60	\$726.11	\$0.00	\$194.49	\$0.00	\$37.22	\$27.36		\$9.87		4.2%
MA REE+1 U65 POS Dep	\$1,561.92	\$1,371.00	\$0.00	\$190.91	\$0.00	\$1,626.31	\$1,425.28	\$0.00	\$201.03	\$0.00	\$64.40	\$54.28		\$10.12		4.1%
MA REE+2 U65 POS Dep	\$2,656.49	\$2,356.12	\$0.00	\$300.37	\$0.00	\$2,764.72	\$2,449.85	\$0.00	\$314.87	\$0.00	\$108.23	\$93.73		\$14.50		4.1%
MA REE+SP+1 U65 POS Dep	\$1,829.69	\$1,577.27	\$0.00	\$252.41	\$0.00	\$1,906.65	\$1,639.19	\$0.00	\$267.46	\$0.00	\$76.97	\$61.92		\$15.05		4.2%
BCBS HMO/Medicare																
Employee	\$804.83	\$724.35	\$0.00	\$80.48	\$0.00	\$837.06	\$753.35	\$0.00	\$83.71	\$0.00	\$32.23	\$29.00		\$3.23		4.0%
Family	\$1,520.31	\$1,368.27	\$0.00	\$152.03	\$0.00	\$1,581.19	\$1,423.07	\$0.00	\$158.12	\$0.00	\$60.88	\$54.80		\$6.09		4.0%
BCBS Indemnity/Medicare																
Employee	\$615.60	\$492.48	\$0.00	\$123.12	\$0.00	\$640.26	\$512.20	\$0.00	\$128.06	\$0.00	\$24.65	\$19.72		\$4.93		4.0%
Family	\$1,577.13	\$1,261.70	\$0.00	\$315.43	\$0.00	\$1,640.29	\$1,312.23	\$0.00	\$328.06	\$0.00	\$63.16	\$50.53		\$12.63		4.0%
BCBS PPO Plus Medicare																
Employee	\$615.60	\$554.04	\$0.00	\$61.56	\$0.00	\$640.26	\$576.23	\$0.00	\$64.03	\$0.00	\$24.65	\$22.19		\$2.46		4.0%
Family	\$1,577.13	\$1,419.42	\$0.00	\$157.71	\$0.00	\$1,640.29	\$1,476.26	\$0.00	\$164.03	\$0.00	\$63.16	\$56.84		\$6.31		4.0%

Fulton County
2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness	
2005 RETIREES																
UNDER 65																
BCBS HSA																
Employee	\$1,013.98	\$861.89	\$881.89	\$152.10	\$132.10	\$1,054.59	\$896.40	\$916.40	\$158.19	\$138.19	\$40.61	\$34.51	\$34.51	\$6.09	\$6.09	4.0%
Employee + 1	\$1,938.35	\$1,647.59	\$1,667.59	\$290.75	\$270.75	\$2,015.97	\$1,713.57	\$1,733.57	\$302.40	\$282.40	\$77.62	\$65.98	\$65.98	\$11.65	\$11.65	4.0%
Family	\$2,586.18	\$2,198.25	\$2,218.25	\$387.93	\$367.93	\$2,689.75	\$2,286.29	\$2,306.29	\$403.46	\$383.46	\$103.57	\$88.04	\$88.04	\$15.53	\$15.53	4.0%
Kaiser HMO																
Employee	\$820.58	\$697.49	\$717.49	\$123.09	\$103.09	\$864.92	\$735.18	\$755.18	\$129.74	\$109.74	\$44.34	\$37.69	\$37.69	\$6.65	\$6.65	5.4%
Employee + 1	\$1,568.63	\$1,333.34	\$1,353.34	\$235.29	\$215.29	\$1,653.38	\$1,405.37	\$1,425.37	\$248.01	\$228.01	\$84.75	\$72.03	\$72.03	\$12.72	\$12.72	5.4%
Family	\$2,094.78	\$1,780.56	\$1,800.56	\$314.22	\$294.22	\$2,207.97	\$1,876.77	\$1,896.77	\$331.20	\$311.20	\$113.19	\$96.21	\$96.21	\$16.98	\$16.98	5.4%
BCBS POS																
Employee	\$1,294.15	\$1,100.02	\$1,120.02	\$194.12	\$174.12	\$1,345.97	\$1,144.08	\$1,164.08	\$201.89	\$181.89	\$51.83	\$44.06	\$44.06	\$7.77	\$7.77	4.0%
Employee + 1	\$2,388.72	\$2,030.41	\$2,050.41	\$358.31	\$338.31	\$2,484.38	\$2,111.72	\$2,131.72	\$372.66	\$352.66	\$95.66	\$81.31	\$81.31	\$14.35	\$14.35	4.0%
Family	\$3,241.09	\$2,754.92	\$2,774.92	\$486.16	\$466.16	\$3,370.88	\$2,865.25	\$2,885.25	\$505.63	\$485.63	\$129.79	\$110.33	\$110.33	\$19.47	\$19.47	4.0%
2005 POS RET W/EADV SP	\$1,561.92	\$1,294.83	\$1,314.83	\$267.08	\$247.08	\$1,626.31	\$1,346.11	\$1,366.11	\$280.20	\$260.20	\$64.40	\$51.28	\$51.28	\$13.12	\$13.12	4.1%
2005 POS RET W/HMO MED SP	\$2,098.97	\$1,784.13	\$1,804.13	\$314.85	\$294.85	\$2,183.03	\$1,855.58	\$1,875.58	\$327.45	\$307.45	\$84.06	\$71.45	\$71.45	\$12.61	\$12.61	4.0%
BCBS HMO																
Employee	\$1,136.05	\$965.64	\$985.64	\$170.41	\$150.41	\$1,181.54	\$1,004.31	\$1,024.31	\$177.23	\$157.23	\$45.49	\$38.67	\$38.67	\$6.83	\$6.83	4.0%
Employee + 1	\$2,096.82	\$1,782.29	\$1,802.29	\$314.52	\$294.52	\$2,180.79	\$1,853.67	\$1,873.67	\$327.12	\$307.12	\$83.97	\$71.38	\$71.38	\$12.60	\$12.60	4.0%
Family	\$2,845.16	\$2,418.38	\$2,438.38	\$426.77	\$406.77	\$2,959.10	\$2,515.23	\$2,535.23	\$443.87	\$423.87	\$113.94	\$96.85	\$96.85	\$17.09	\$17.09	4.0%
OVER 65																
Kaiser Senior Advantage Plan																
REE-Only	\$175.37	\$149.06	\$0.00	\$26.31	\$0.00	\$175.37	\$149.06	\$0.00	\$26.31	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
REE+1	\$350.74	\$298.13	\$0.00	\$52.61	\$0.00	\$350.74	\$298.13	\$0.00	\$52.61	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
Family	\$526.11	\$447.19	\$0.00	\$78.92	\$0.00	\$526.11	\$447.19	\$0.00	\$78.92	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
SR REE + 1 U65 KP HMO DEP	\$995.95	\$846.56	\$0.00	\$149.39	\$0.00	\$1,040.29	\$884.25	\$0.00	\$156.04	\$0.00	\$44.34	\$37.69		\$6.65		4.5%
REE U65 KP HMO + SR DEP	\$995.95	\$846.56	\$0.00	\$149.39	\$0.00	\$1,040.29	\$884.25	\$0.00	\$156.04	\$0.00	\$44.34	\$37.69		\$93.31		4.5%
Aetna Medicare Advantage - Base																
REE-Only	\$229.19	\$194.81	\$0.00	\$34.38	\$0.00	\$237.68	\$202.03	\$0.00	\$35.65	\$0.00	\$8.49	\$7.22		\$1.27		3.7%
REE+1	\$458.38	\$389.62	\$0.00	\$68.76	\$0.00	\$475.36	\$404.06	\$0.00	\$71.30	\$0.00	\$16.98	\$14.44		\$2.54		3.7%
Family	\$687.57	\$584.43	\$0.00	\$103.14	\$0.00	\$713.04	\$606.08	\$0.00	\$106.96	\$0.00	\$25.47	\$21.65		\$3.82		3.7%
MA REE+SP+1 U65 HMO Dep	\$1,594.43	\$1,355.26	\$0.00	\$239.16	\$0.00	\$1,656.90	\$1,408.37	\$0.00	\$248.53	\$0.00	\$62.47	\$53.11		\$9.37		3.9%
MA REE+SP+2 U65 HMO Deps	\$2,555.20	\$2,171.92	\$0.00	\$383.28	\$0.00	\$2,656.15	\$2,257.73	\$0.00	\$398.42	\$0.00	\$100.95	\$85.81		\$15.14		4.0%
MA REE+1 U65 HMO Dep	\$1,365.24	\$1,160.45	\$0.00	\$204.79	\$0.00	\$1,419.22	\$1,206.34	\$0.00	\$212.88	\$0.00	\$53.98	\$45.89		\$8.10		4.0%
MA REE+2 U65 HMO Deps	\$2,326.01	\$1,977.11	\$0.00	\$348.90	\$0.00	\$2,418.47	\$2,055.70	\$0.00	\$362.77	\$0.00	\$92.46	\$78.59		\$13.87		4.0%
MA SP+U65 HMO REE	\$1,365.24	\$1,160.45	\$0.00	\$204.79	\$0.00	\$1,419.22	\$1,206.34	\$0.00	\$212.88	\$0.00	\$53.98	\$45.89		\$8.10		4.0%
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,326.01	\$1,977.11	\$0.00	\$348.90	\$0.00	\$2,418.47	\$2,055.70	\$0.00	\$362.77	\$0.00	\$92.46	\$78.59		\$13.87		4.0%
MA SP+O65 Ind REE	\$844.79	\$674.98	\$0.00	\$169.81	\$0.00	\$877.94	\$701.43	\$0.00	\$176.51	\$0.00	\$33.14	\$26.45		\$6.69		3.9%
MA REE+1 U65 POS Dep	\$1,523.34	\$1,294.83	\$0.00	\$228.50	\$0.00	\$1,583.65	\$1,346.11	\$0.00	\$237.54	\$0.00	\$60.32	\$51.28		\$9.04		4.0%
MA REE+2 U65 POS Dep	\$2,617.91	\$2,225.22	\$0.00	\$392.69	\$0.00	\$2,722.06	\$2,313.75	\$0.00	\$408.31	\$0.00	\$104.15	\$88.53		\$15.62		4.0%
MA REE+SP+1 U65 POS Dep	\$1,752.53	\$1,489.65	\$0.00	\$262.88	\$0.00	\$1,821.33	\$1,548.14	\$0.00	\$273.19	\$0.00	\$68.81	\$58.49		\$10.31		3.9%
Enhanced Aetna Medicare Advantage - Buy-up																
REE-Only	\$267.77	\$194.81	\$0.00	\$72.96	\$0.00	\$280.34	\$202.03	\$0.00	\$78.31	\$0.00	\$12.57	\$7.22		\$5.35		4.7%
REE+1	\$535.54	\$389.62	\$0.00	\$145.92	\$0.00	\$560.68	\$404.06	\$0.00	\$156.62	\$0.00	\$25.14	\$14.44		\$10.70		4.7%
Family	\$803.31	\$584.43	\$0.00	\$218.88	\$0.00	\$841.02	\$606.08	\$0.00	\$234.94	\$0.00	\$37.71	\$21.65		\$16.06		4.7%
MA REE+SP+1 U65 HMO Dep	\$1,671.59	\$1,355.26	\$0.00	\$316.32	\$0.00	\$1,742.22	\$1,408.37	\$0.00	\$333.85	\$0.00	\$70.63	\$53.11		\$17.53		4.2%
MA REE+SP+2 U65 HMO Deps	\$2,632.36	\$2,171.92	\$0.00	\$460.44	\$0.00	\$2,741.47	\$2,257.73	\$0.00	\$483.74	\$0.00	\$109.11	\$85.81		\$23.30		4.1%
MA REE+1 U65 HMO Dep	\$1,403.82	\$1,160.45	\$0.00	\$243.37	\$0.00	\$1,461.88	\$1,206.34	\$0.00	\$255.54	\$0.00	\$58.06	\$45.89		\$12.18		4.1%
MA REE+2 U65 HMO Deps	\$2,364.59	\$1,977.11	\$0.00	\$387.48	\$0.00	\$2,461.13	\$2,055.70	\$0.00	\$405.43	\$0.00	\$96.54	\$78.59		\$17.95		4.1%
MA SP+U65 HMO REE	\$1,403.82	\$1,160.45	\$0.00	\$243.37	\$0.00	\$1,461.88	\$1,206.34	\$0.00	\$255.54	\$0.00	\$58.06	\$45.89		\$12.18		4.1%
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,364.59	\$1,977.11	\$0.00	\$387.48	\$0.00	\$2,461.13	\$2,055.70	\$0.00	\$405.43	\$0.00	\$96.54	\$78.59		\$17.95		4.1%

2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness	
MA SP+O65 Ind REE	\$883.37	\$674.98	\$0.00	\$208.39	\$0.00	\$920.60	\$701.43	\$0.00	\$219.17	\$0.00	\$37.22	\$26.45		\$10.77		4.2%
MA REE+1 U65 POS Dep	\$1,561.92	\$1,294.83	\$0.00	\$267.08	\$0.00	\$1,626.31	\$1,346.11	\$0.00	\$280.20	\$0.00	\$64.40	\$51.28		\$13.12		4.1%
MA REE+2 U65 POS Dep	\$2,656.49	\$2,225.22	\$0.00	\$431.27	\$0.00	\$2,764.72	\$2,313.75	\$0.00	\$450.97	\$0.00	\$108.23	\$88.53		\$19.70		4.1%
MA REE+SP+1 U65 POS Dep	\$1,829.69	\$1,489.65	\$0.00	\$340.04	\$0.00	\$1,906.65	\$1,548.14	\$0.00	\$358.51	\$0.00	\$76.97	\$58.49		\$18.47		4.2%
BCBS HMO/Medicare																
Employee	\$804.83	\$684.10	\$0.00	\$120.72	\$0.00	\$837.06	\$711.50	\$0.00	\$125.56	\$0.00	\$32.23	\$27.40		\$4.84		4.0%
Family	\$1,520.31	\$1,292.26	\$0.00	\$228.05	\$0.00	\$1,581.19	\$1,344.01	\$0.00	\$237.18	\$0.00	\$60.88	\$51.75		\$9.13		4.0%
BCBS Indemnity/Medicare																
Employee	\$615.60	\$480.17	\$0.00	\$135.43	\$0.00	\$640.26	\$499.40	\$0.00	\$140.86	\$0.00	\$24.65	\$19.23		\$5.42		4.0%
Family	\$1,577.13	\$1,230.16		\$346.97	\$0.00	\$1,640.29	\$1,279.42	\$0.00	\$360.87	\$0.00	\$63.16	\$49.26		\$13.90		4.0%

Fulton County
2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness			
2006 RETIREES																
UNDER 65																
BCBS HSA																
Employee	\$1,013.98	\$841.61	\$861.61	\$172.38	\$152.38	\$1,054.59	\$875.31	\$895.31	\$179.28	\$159.28	\$40.61	\$33.70	\$33.70	\$6.90	\$6.90	4.0%
Employee + 1	\$1,938.35	\$1,608.83	\$1,628.83	\$329.52	\$309.52	\$2,015.97	\$1,673.25	\$1,693.25	\$342.72	\$322.72	\$77.62	\$64.42	\$64.42	\$13.20	\$13.20	4.0%
Family	\$2,586.18	\$2,146.53	\$2,166.53	\$439.65	\$419.65	\$2,689.75	\$2,232.49	\$2,252.49	\$457.26	\$437.26	\$103.57	\$85.96	\$85.96	\$17.61	\$17.61	4.0%
Kaiser HMO																
Employee	\$820.58	\$681.08	\$701.08	\$139.50	\$119.50	\$864.92	\$717.88	\$737.88	\$147.04	\$127.04	\$44.34	\$36.80	\$36.80	\$7.54	\$7.54	5.4%
Employee + 1	\$1,568.63	\$1,301.96	\$1,321.96	\$266.67	\$246.67	\$1,653.38	\$1,372.31	\$1,392.31	\$281.07	\$261.07	\$84.75	\$70.35	\$70.35	\$14.40	\$14.40	5.4%
Family	\$2,094.78	\$1,738.67	\$1,758.67	\$356.11	\$336.11	\$2,207.97	\$1,832.62	\$1,852.62	\$375.35	\$355.35	\$113.19	\$93.95	\$93.95	\$19.24	\$19.24	5.4%
2006 Kaiser RET W/OVERAGE HMO MED DE	\$995.95	\$826.64	\$846.64	\$169.31	\$149.31	\$1,040.29	\$863.44	\$883.44	\$176.85	\$156.85	\$44.34	\$36.80	\$36.80	\$7.54	\$7.54	4.5%
BCBS POS																
Employee	\$1,294.15	\$1,074.14	\$1,094.14	\$220.00	\$200.00	\$1,345.97	\$1,117.16	\$1,137.16	\$228.81	\$208.81	\$51.83	\$43.02	\$43.02	\$8.81	\$8.81	4.0%
Employee + 1	\$2,388.72	\$1,982.64	\$2,002.64	\$406.08	\$386.08	\$2,484.38	\$2,062.04	\$2,082.04	\$422.34	\$402.34	\$95.66	\$79.40	\$79.40	\$16.26	\$16.26	4.0%
Family	\$3,241.09	\$2,690.10	\$2,710.10	\$550.98	\$530.98	\$3,370.88	\$2,797.83	\$2,817.83	\$573.05	\$553.05	\$129.79	\$107.73	\$107.73	\$22.07	\$22.07	4.0%
2006 POS RET W/MADV SP	\$1,523.34	\$1,264.37	\$1,284.37	\$258.97	\$238.97	\$1,583.65	\$1,314.43	\$1,334.43	\$269.22	\$249.22	\$60.32	\$50.06	\$50.06	\$10.25	\$10.25	4.0%
2006 POS RET W/HMO MED SP	\$2,098.97	\$1,742.15	\$1,762.15	\$356.83	\$336.83	\$2,183.03	\$1,811.92	\$1,831.92	\$371.11	\$351.11	\$84.06	\$69.77	\$69.77	\$14.29	\$14.29	4.0%
BCBS HMO																
Employee	\$1,136.05	\$942.92	\$962.92	\$193.13	\$173.13	\$1,181.54	\$980.68	\$1,000.68	\$200.86	\$180.86	\$45.49	\$37.76	\$37.76	\$7.74	\$7.74	4.0%
Employee + 1	\$2,096.82	\$1,740.36	\$1,760.36	\$356.46	\$336.46	\$2,180.79	\$1,810.05	\$1,830.05	\$370.74	\$350.74	\$83.97	\$69.69	\$69.69	\$14.28	\$14.28	4.0%
Family	\$2,845.16	\$2,361.48	\$2,381.48	\$483.68	\$463.68	\$2,959.10	\$2,456.05	\$2,476.05	\$503.05	\$483.05	\$113.94	\$94.57	\$94.57	\$19.37	\$19.37	4.0%
OVER 65																
Kaiser Senior Advantage Plan																
REE-Only	\$175.37	\$145.56	\$0.00	\$29.81	\$0.00	\$175.37	\$145.56	\$0.00	\$29.81	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
REE+1	\$350.74	\$291.11	\$0.00	\$59.63	\$0.00	\$350.74	\$291.11	\$0.00	\$59.63	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
Family	\$526.11	\$436.67	\$0.00	\$89.44	\$0.00	\$526.11	\$436.67	\$0.00	\$89.44	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
SR REE + 1 U65 KP HMO DEP	\$995.95	\$826.64	\$0.00	\$169.31	\$0.00	\$1,040.29	\$863.44	\$0.00	\$176.85	\$0.00	\$44.34	\$36.80		\$7.54		4.5%
REE U65 KP HMO + SR DEP	\$995.95	\$826.64	\$0.00	\$169.31	\$0.00	\$1,040.29	\$863.44	\$0.00	\$176.85	\$0.00	\$44.34	\$36.80		\$7.54		4.5%
Aetna Medicare Advantage - Base																
REE-Only	\$229.19	\$190.23	\$0.00	\$38.96	\$0.00	\$237.68	\$197.27	\$0.00	\$40.41	\$0.00	\$8.49	\$7.04		\$1.45		3.7%
REE+1	\$458.38	\$380.46	\$0.00	\$77.92	\$0.00	\$475.36	\$394.55	\$0.00	\$80.81	\$0.00	\$16.98	\$14.09		\$2.89		3.7%
Family	\$687.57	\$570.68	\$0.00	\$116.89	\$0.00	\$713.04	\$591.82	\$0.00	\$121.22	\$0.00	\$25.47	\$21.14		\$4.33		3.7%
MA REE+SP+1 U65 HMO Dep	\$1,594.43	\$1,323.38	\$0.00	\$271.05	\$0.00	\$1,656.90	\$1,375.23	\$0.00	\$281.67	\$0.00	\$62.47	\$51.85		\$10.62		3.9%
MA REE+SP+2 U65 HMO Deps	\$2,555.20	\$2,120.81	\$0.00	\$434.38	\$0.00	\$2,656.15	\$2,204.60	\$0.00	\$451.55	\$0.00	\$100.95	\$83.79		\$17.16		4.0%
MA REE+1 U65 HMO Dep	\$1,365.24	\$1,133.15	\$0.00	\$232.09	\$0.00	\$1,419.22	\$1,177.95	\$0.00	\$241.27	\$0.00	\$53.98	\$44.80		\$9.18		4.0%
MA REE+2 U65 HMO Deps	\$2,326.01	\$1,930.59	\$0.00	\$395.42	\$0.00	\$2,418.47	\$2,007.32	\$0.00	\$411.15	\$0.00	\$92.46	\$76.73		\$15.73		4.0%
MA SP+U65 HMO REE	\$1,365.24	\$1,133.15	\$0.00	\$232.09	\$0.00	\$1,419.22	\$1,177.95	\$0.00	\$241.27	\$0.00	\$53.98	\$44.80		\$9.18		4.0%
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,326.01	\$1,930.59	\$0.00	\$395.42	\$0.00	\$2,418.47	\$2,007.32	\$0.00	\$411.15	\$0.00	\$92.46	\$76.73		\$15.73		4.0%
MA SP+O65 Ind REE	\$844.79	\$664.24	\$0.00	\$180.55	\$0.00	\$877.94	\$690.27	\$0.00	\$187.67	\$0.00	\$33.14	\$26.03		\$7.11		3.9%
MA REE+1 U65 POS Dep	\$1,523.34	\$1,264.37	\$0.00	\$258.97	\$0.00	\$1,583.65	\$1,314.43	\$0.00	\$269.22	\$0.00	\$60.32	\$50.06		\$10.25		4.0%
MA REE+2 U65 POS Dep	\$2,617.91	\$2,172.87	\$0.00	\$445.04	\$0.00	\$2,722.06	\$2,259.31	\$0.00	\$462.75	\$0.00	\$104.15	\$86.44		\$17.71		4.0%
MA REE+SP+1 U65 POS Dep	\$1,752.53	\$1,454.60	\$0.00	\$297.93	\$0.00	\$1,821.33	\$1,511.71	\$0.00	\$309.62	\$0.00	\$68.81	\$57.11		\$11.69		3.9%
Enhanced Aetna Medicare Advantage - Buy-up																
REE-Only	\$267.77	\$190.23	\$0.00	\$77.54	\$0.00	\$280.34	\$197.27	\$0.00	\$83.07	\$0.00	\$12.57	\$7.04		\$5.53		4.7%
REE+1	\$535.54	\$380.46	\$0.00	\$155.08	\$0.00	\$560.68	\$394.55	\$0.00	\$166.13	\$0.00	\$25.14	\$14.09		\$11.05		4.7%
Family	\$803.31	\$570.68	\$0.00	\$232.63	\$0.00	\$841.02	\$591.82	\$0.00	\$249.20	\$0.00	\$37.71	\$21.14		\$16.57		4.7%
MA REE+SP+1 U65 HMO Dep	\$1,671.59	\$1,323.38	\$0.00	\$348.21	\$0.00	\$1,742.22	\$1,375.23	\$0.00	\$366.99	\$0.00	\$70.63	\$51.85		\$18.78		4.2%
MA REE+SP+2 U65 HMO Deps	\$2,632.36	\$2,120.81	\$0.00	\$511.54	\$0.00	\$2,741.47	\$2,204.60	\$0.00	\$536.87	\$0.00	\$109.11	\$83.79		\$25.32		4.1%
MA REE+1 U65 HMO Dep	\$1,403.82	\$1,133.15	\$0.00	\$270.67	\$0.00	\$1,461.88	\$1,177.95	\$0.00	\$283.93	\$0.00	\$58.06	\$44.80		\$13.26		4.1%
MA REE+2 U65 HMO Deps	\$2,364.59	\$1,930.59	\$0.00	\$434.00	\$0.00	\$2,461.13	\$2,007.32	\$0.00	\$453.81	\$0.00	\$96.54	\$76.73		\$19.81		4.1%
MA SP+U65 HMO REE	\$1,403.82	\$1,133.15	\$0.00	\$270.67	\$0.00	\$1,461.88	\$1,177.95	\$0.00	\$283.93	\$0.00	\$58.06	\$44.80		\$13.26		4.1%

2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness	
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,364.59	\$1,930.59	\$0.00	\$434.00	\$0.00	\$2,461.13	\$2,007.32	\$0.00	\$453.81	\$0.00	\$96.54	\$76.73		\$19.81		4.1%
MA SP+O65 Ind REE	\$883.37	\$664.24	\$0.00	\$219.13	\$0.00	\$920.60	\$690.27	\$0.00	\$230.33	\$0.00	\$37.22	\$26.03		\$11.19		4.2%
MA REE+1 U65 POS Dep	\$1,561.92	\$1,264.37	\$0.00	\$297.55	\$0.00	\$1,626.31	\$1,314.43	\$0.00	\$311.88	\$0.00	\$64.40	\$50.06		\$14.33		4.1%
MA REE+2 U65 POS Dep	\$2,656.49	\$2,172.87	\$0.00	\$483.62	\$0.00	\$2,764.72	\$2,259.31	\$0.00	\$505.41	\$0.00	\$108.23	\$86.44		\$21.79		4.1%
MA REE+SP+1 U65 POS Dep	\$1,829.69	\$1,454.60	\$0.00	\$375.09	\$0.00	\$1,906.65	\$1,511.71	\$0.00	\$394.94	\$0.00	\$76.97	\$57.11		\$19.85		4.2%
BCBS HMO/Medicare																
Employee	\$804.83	\$668.01	\$0.00	\$136.82	\$0.00	\$837.06	\$694.76	\$0.00	\$142.30	\$0.00	\$32.23	\$26.75		\$5.48		4.0%
Family	\$1,520.31	\$1,261.85	\$0.00	\$258.45	\$0.00	\$1,581.19	\$1,312.39	\$0.00	\$268.80	\$0.00	\$60.88	\$50.54		\$10.35		4.0%
BCBS Indemnity/Medicare																
Employee	\$615.60	\$474.01	\$0.00	\$141.59	\$0.00	\$640.26	\$493.00	\$0.00	\$147.26	\$0.00	\$24.65	\$18.99		\$5.67		4.0%
Family	\$1,577.13	\$1,214.39	\$0.00	\$362.74	\$0.00	\$1,640.29	\$1,263.02	\$0.00	\$377.27	\$0.00	\$63.16	\$48.63		\$14.53		4.0%

Fulton County
2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness			
2007 - 2011 RETIREES																
UNDER 65																
BCBS HSA																
Employee	\$1,013.98	\$811.19	\$831.19	\$202.80	\$182.80	\$1,054.59	\$843.67	\$863.67	\$210.92	\$190.92	\$40.61	\$32.48	\$32.48	\$8.12	\$8.12	4.0%
Employee + 1	\$1,938.35	\$1,550.68	\$1,570.68	\$387.67	\$367.67	\$2,015.97	\$1,612.78	\$1,632.78	\$403.19	\$383.19	\$77.62	\$62.10	\$62.10	\$15.52	\$15.52	4.0%
Family	\$2,586.18	\$2,068.94	\$2,088.94	\$517.24	\$497.24	\$2,689.75	\$2,151.80	\$2,171.80	\$537.95	\$517.95	\$103.57	\$82.86	\$82.86	\$20.71	\$20.71	4.0%
Kaiser HMO																
Employee	\$820.58	\$656.46	\$676.46	\$164.12	\$144.12	\$864.92	\$691.94	\$711.94	\$172.98	\$152.98	\$44.34	\$35.48	\$35.48	\$8.86	\$8.86	5.4%
Employee + 1	\$1,568.63	\$1,254.90	\$1,274.90	\$313.73	\$293.73	\$1,653.38	\$1,322.70	\$1,342.70	\$330.68	\$310.68	\$84.75	\$67.80	\$67.80	\$16.95	\$16.95	5.4%
Family	\$2,094.78	\$1,675.82	\$1,695.82	\$418.96	\$398.96	\$2,207.97	\$1,766.38	\$1,786.38	\$441.59	\$421.59	\$113.19	\$90.56	\$90.56	\$22.63	\$22.63	5.4%
2007 Kaiser RET W/OVERAGE HMO MED DE	\$995.95	\$796.76	\$816.76	\$199.19	\$179.19	\$1,040.29	\$832.24	\$852.24	\$208.05	\$188.05	\$44.34	\$35.48	\$35.48	\$8.86	\$8.86	4.5%
BCBS POS																
Employee	\$1,294.15	\$1,035.32	\$1,055.32	\$258.83	\$238.83	\$1,345.97	\$1,076.78	\$1,096.78	\$269.19	\$249.19	\$51.83	\$41.46	\$41.46	\$10.36	\$10.36	4.0%
Employee + 1	\$2,388.72	\$1,910.98	\$1,930.98	\$477.74	\$457.74	\$2,484.38	\$1,987.51	\$2,007.51	\$496.87	\$476.87	\$95.66	\$76.53	\$76.53	\$19.13	\$19.13	4.0%
Family	\$3,241.09	\$2,592.87	\$2,612.87	\$648.22	\$628.22	\$3,370.88	\$2,696.71	\$2,716.71	\$674.17	\$654.17	\$129.79	\$103.84	\$103.84	\$25.96	\$25.96	4.0%
2007-2011 POS RET W/MADV SP	\$1,523.34	\$1,218.67	\$1,238.67	\$304.67	\$284.67	\$1,583.65	\$1,266.92	\$1,286.92	\$316.73	\$296.73	\$60.32	\$48.25	\$48.25	\$12.06	\$12.06	4.0%
2007-2011 2 POS<65 W/MADV SP	\$2,617.91	\$2,094.33	\$2,114.33	\$523.58	\$503.58	\$2,722.06	\$2,177.65	\$2,197.65	\$544.41	\$524.41	\$104.15	\$83.32	\$83.32	\$20.83	\$20.83	4.0%
2007-2011 2 POS<65 W/MADV SP + 1	\$2,847.10	\$2,277.68	\$2,297.68	\$569.42	\$549.42	\$2,959.74	\$2,367.80	\$2,387.80	\$591.94	\$571.94	\$112.64	\$90.12	\$90.12	\$22.52	\$22.52	4.0%
2007-2011 POS RET W/EADV SP	\$1,561.92	\$1,218.67	\$1,238.67	\$343.25	\$323.25	\$1,626.31	\$1,266.92	\$1,286.92	\$359.39	\$339.39	\$64.40	\$48.25	\$48.25	\$16.14	\$16.14	4.1%
2007-2011 2 POS<65 W/EADV SP	\$2,656.49	\$2,094.33	\$2,114.33	\$562.16	\$542.16	\$2,764.72	\$2,177.65	\$2,197.65	\$587.07	\$567.07	\$108.23	\$83.32	\$83.32	\$24.91	\$24.91	4.1%
2007-2011 2 POS<65 W/EADV SP + 1	\$2,924.26	\$2,277.68	\$2,297.68	\$646.58	\$626.58	\$3,045.06	\$2,367.80	\$2,387.80	\$677.26	\$657.26	\$120.80	\$90.12	\$90.12	\$30.68	\$30.68	4.1%
2007-2011 POS RET W/HMO SP	\$2,098.97	\$1,679.18	\$1,699.18	\$419.79	\$399.79	\$2,183.03	\$1,746.43	\$1,766.43	\$436.60	\$416.60	\$84.06	\$67.25	\$67.25	\$16.81	\$16.81	4.0%
2007-2011 RET W/IND MED SP	\$1,909.75	\$1,497.02	\$1,517.02	\$412.73	\$392.73	\$1,986.23	\$1,556.97	\$1,576.97	\$429.26	\$409.26	\$76.48	\$59.95	\$59.95	\$16.53	\$16.53	4.0%
BCBS HMO																
Employee	\$1,136.05	\$908.84	\$928.84	\$227.21	\$207.21	\$1,181.54	\$945.24	\$965.24	\$236.30	\$216.30	\$45.49	\$36.40	\$36.40	\$9.09	\$9.09	4.0%
Employee + 1	\$2,096.82	\$1,677.45	\$1,697.45	\$419.36	\$399.36	\$2,180.79	\$1,744.63	\$1,764.63	\$436.16	\$416.16	\$83.97	\$67.18	\$67.18	\$16.79	\$16.79	4.0%
Family	\$2,845.16	\$2,276.13	\$2,296.13	\$569.03	\$549.03	\$2,959.10	\$2,367.28	\$2,387.28	\$591.82	\$571.82	\$113.94	\$91.15	\$91.15	\$22.78	\$22.78	4.0%
OVER 65																
Kaiser Senior Advantage Plan																
REE-Only	\$175.37	\$140.30	\$0.00	\$35.07	\$0.00	\$175.37	\$140.30	\$0.00	\$35.07	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
REE+1	\$350.74	\$280.59	\$0.00	\$70.15	\$0.00	\$350.74	\$280.59	\$0.00	\$70.15	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
Family	\$526.11	\$420.89	\$0.00	\$105.22	\$0.00	\$526.11	\$420.89	\$0.00	\$105.22	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
SR REE + 1 U65 KP HMO DEP	\$995.95	\$796.76	\$0.00	\$199.19	\$0.00	\$1,040.29	\$832.24	\$0.00	\$208.05	\$0.00	\$44.34	\$35.48		\$8.86		4.5%
SR REE + 2 U65 KP HMO DEP	\$1,744.00	\$1,395.20	\$0.00	\$348.80	\$0.00	\$1,828.75	\$1,463.00	\$0.00	\$365.75	\$0.00	\$84.75	\$67.80		\$16.95		4.9%
REE U65 KP HMO + SR DEP	\$995.95	\$796.76	\$0.00	\$199.19	\$0.00	\$1,040.29	\$832.24	\$0.00	\$208.05	\$0.00	\$44.34	\$35.48		\$8.86		4.5%
Aetna Medicare Advantage - Base																
REE-Only	\$229.19	\$183.35	\$0.00	\$45.84	\$0.00	\$237.68	\$190.14	\$0.00	\$47.54	\$0.00	\$8.49	\$6.79		\$1.70		3.7%
REE+1	\$458.38	\$366.70	\$0.00	\$91.68	\$0.00	\$475.36	\$380.29	\$0.00	\$95.07	\$0.00	\$16.98	\$13.59		\$3.39		3.7%
Family	\$687.57	\$550.06	\$0.00	\$137.51	\$0.00	\$713.04	\$570.43	\$0.00	\$142.61	\$0.00	\$25.47	\$20.37		\$5.10		3.7%
MA REE+SP+1 U65 HMO Dep	\$1,594.43	\$1,275.54	\$0.00	\$318.89	\$0.00	\$1,656.90	\$1,325.53	\$0.00	\$331.37	\$0.00	\$62.47	\$49.99		\$12.49		3.9%
MA REE+SP+2 U65 HMO Deps	\$2,555.20	\$2,044.16	\$0.00	\$511.04	\$0.00	\$2,656.15	\$2,124.92	\$0.00	\$531.23	\$0.00	\$100.95	\$80.76		\$20.19		4.0%
MA REE+1 U65 HMO Dep	\$1,365.24	\$1,092.19	\$0.00	\$273.05	\$0.00	\$1,419.22	\$1,135.38	\$0.00	\$283.84	\$0.00	\$53.98	\$43.19		\$10.80		4.0%
MA REE+2 U65 HMO Deps	\$2,326.01	\$1,860.81	\$0.00	\$465.20	\$0.00	\$2,418.47	\$1,934.77	\$0.00	\$483.70	\$0.00	\$92.46	\$73.96		\$18.50		4.0%
MA SP+U65 HMO REE	\$1,365.24	\$1,092.19	\$0.00	\$273.05	\$0.00	\$1,419.22	\$1,135.38	\$0.00	\$283.84	\$0.00	\$53.98	\$43.19		\$10.80		4.0%
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,326.01	\$1,860.81	\$0.00	\$465.20	\$0.00	\$2,418.47	\$1,934.77	\$0.00	\$483.70	\$0.00	\$92.46	\$73.96		\$18.50		4.0%
MA SP+O65 Ind REE	\$844.79	\$645.05	\$0.00	\$199.74	\$0.00	\$877.94	\$670.33	\$0.00	\$207.61	\$0.00	\$33.14	\$25.28		\$7.87		3.9%
MA REE+1 U65 POS Dep	\$1,523.34	\$1,218.67	\$0.00	\$304.67	\$0.00	\$1,583.65	\$1,266.92	\$0.00	\$316.73	\$0.00	\$60.32	\$48.25		\$12.06		4.0%
MA REE+2 U65 POS Dep	\$2,617.91	\$2,094.33	\$0.00	\$523.58	\$0.00	\$2,722.06	\$2,177.65	\$0.00	\$544.41	\$0.00	\$104.15	\$83.32		\$20.83		4.0%
MA REE+SP+1 U65 POS Dep	\$1,752.53	\$1,402.02	\$0.00	\$350.51	\$0.00	\$1,821.33	\$1,457.07	\$0.00	\$364.26	\$0.00	\$68.81	\$55.05		\$13.76		3.9%
Enhanced Aetna Medicare Advantage - Buy-up																
REE-Only	\$267.77	\$183.35	\$0.00	\$84.42	\$0.00	\$280.34	\$190.14	\$0.00	\$90.20	\$0.00	\$12.57	\$6.79		\$5.78		4.7%

2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness	
REE+1	\$535.54	\$366.70	\$0.00	\$168.84	\$0.00	\$560.68	\$380.29	\$0.00	\$180.39	\$0.00	\$25.14	\$13.59		\$11.55		4.7%
Family	\$803.31	\$550.06	\$0.00	\$253.25	\$0.00	\$841.02	\$570.43	\$0.00	\$270.59	\$0.00	\$37.71	\$20.37		\$17.34		4.7%
MA REE+SP+1 U65 HMO Dep	\$1,671.59	\$1,275.54	\$0.00	\$396.05	\$0.00	\$1,742.22	\$1,325.53	\$0.00	\$416.69	\$0.00	\$70.63	\$49.99		\$20.65		4.2%
MA REE+SP+2 U65 HMO Deps	\$2,632.36	\$2,044.16	\$0.00	\$588.20	\$0.00	\$2,741.47	\$2,124.92	\$0.00	\$616.55	\$0.00	\$109.11	\$80.76		\$28.35		4.1%
MA REE+1 U65 HMO Dep	\$1,403.82	\$1,092.19	\$0.00	\$311.63	\$0.00	\$1,461.88	\$1,135.38	\$0.00	\$326.50	\$0.00	\$58.06	\$43.19		\$14.88		4.1%
MA REE+2 U65 HMO Deps	\$2,364.59	\$1,860.81	\$0.00	\$503.78	\$0.00	\$2,461.13	\$1,934.77	\$0.00	\$526.36	\$0.00	\$96.54	\$73.96		\$22.58		4.1%
MA SP+U65 HMO REE	\$1,403.82	\$1,092.19	\$0.00	\$311.63	\$0.00	\$1,461.88	\$1,135.38	\$0.00	\$326.50	\$0.00	\$58.06	\$43.19		\$14.88		4.1%
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,364.59	\$1,860.81	\$0.00	\$503.78	\$0.00	\$2,461.13	\$1,934.77	\$0.00	\$526.36	\$0.00	\$96.54	\$73.96		\$22.58		4.1%
MA SP+O65 Ind REE	\$883.37	\$645.05	\$0.00	\$238.32	\$0.00	\$920.60	\$670.33	\$0.00	\$250.27	\$0.00	\$37.22	\$25.28		\$11.95		4.2%
MA REE+1 U65 POS Dep	\$1,561.92	\$1,218.67	\$0.00	\$343.25	\$0.00	\$1,626.31	\$1,266.92	\$0.00	\$359.39	\$0.00	\$64.40	\$48.25		\$16.14		4.1%
MA REE+2 U65 POS Dep	\$2,656.49	\$2,094.33	\$0.00	\$562.16	\$0.00	\$2,764.72	\$2,177.65	\$0.00	\$587.07	\$0.00	\$108.23	\$83.32		\$24.91		4.1%
MA REE+SP+1 U65 POS Dep	\$1,829.69	\$1,402.02	\$0.00	\$427.67	\$0.00	\$1,906.65	\$1,457.07	\$0.00	\$449.58	\$0.00	\$76.97	\$55.05		\$21.92		4.2%
BCBS HMO/Medicare																
Employee	\$804.83	\$643.86	\$0.00	\$160.97	\$0.00	\$837.06	\$669.65	\$0.00	\$167.41	\$0.00	\$32.23	\$25.79		\$6.44		4.0%
Family	\$1,520.31	\$1,216.24	\$0.00	\$304.06	\$0.00	\$1,581.19	\$1,264.95	\$0.00	\$316.24	\$0.00	\$60.88	\$48.71		\$12.18		4.0%
BCBS Indemnity/Medicare																
Employee	\$615.60	\$461.70	\$0.00	\$153.90	\$0.00	\$640.26	\$480.19	\$0.00	\$160.07	\$0.00	\$24.65	\$18.49		\$6.16		4.0%
Family	\$1,577.13	\$1,182.85	\$0.00	\$394.28	\$0.00	\$1,640.29	\$1,230.22	\$0.00	\$410.07	\$0.00	\$63.16	\$47.37		\$15.78		4.0%

Fulton County
2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness			
2012 - 2015 RETIREES																
UNDER 65																
BCBS HSA																
Employee	\$1,013.98	\$790.91	\$810.91	\$223.08	\$203.08	\$1,054.59	\$822.58	\$842.58	\$232.01	\$212.01	\$40.61	\$31.67	\$31.67	\$8.94	\$8.94	4.0%
Employee + 1	\$1,938.35	\$1,511.91	\$1,531.91	\$426.44	\$406.44	\$2,015.97	\$1,572.46	\$1,592.46	\$443.51	\$423.51	\$77.62	\$60.55	\$60.55	\$17.07	\$17.07	4.0%
Family	\$2,586.18	\$2,017.22	\$2,037.22	\$568.96	\$548.96	\$2,689.75	\$2,098.00	\$2,118.00	\$591.75	\$571.75	\$103.57	\$80.78	\$80.78	\$22.79	\$22.79	4.0%
Kaiser HMO																
Employee	\$820.58	\$640.05	\$660.05	\$180.53	\$160.53	\$864.92	\$674.64	\$694.64	\$190.28	\$170.28	\$44.34	\$34.59	\$34.59	\$9.75	\$9.75	5.4%
Employee + 1	\$1,568.63	\$1,223.53	\$1,243.53	\$345.10	\$325.10	\$1,653.38	\$1,289.64	\$1,309.64	\$363.74	\$343.74	\$84.75	\$66.11	\$66.11	\$18.64	\$18.64	5.4%
Family	\$2,094.78	\$1,633.93	\$1,653.93	\$460.85	\$440.85	\$2,207.97	\$1,722.22	\$1,742.22	\$485.75	\$465.75	\$113.19	\$88.29	\$88.29	\$24.90	\$24.90	5.4%
2012 Kaiser RET W/OVERAGE HMO MED DE	\$995.95	\$776.84	\$796.84	\$219.11	\$199.11	\$1,040.29	\$811.43	\$831.43	\$228.86	\$208.86	\$44.34	\$34.59	\$34.59	\$9.75	\$9.75	4.5%
BCBS POS																
Employee	\$1,294.15	\$1,009.43	\$1,029.43	\$284.71	\$264.71	\$1,345.97	\$1,049.86	\$1,069.86	\$296.11	\$276.11	\$51.83	\$40.43	\$40.43	\$11.40	\$11.40	4.0%
Employee + 1	\$2,388.72	\$1,863.20	\$1,883.20	\$525.52	\$505.52	\$2,484.38	\$1,937.82	\$1,957.82	\$546.56	\$526.56	\$95.66	\$74.62	\$74.62	\$21.04	\$21.04	4.0%
Family	\$3,241.09	\$2,528.05	\$2,548.05	\$713.04	\$693.04	\$3,370.88	\$2,629.29	\$2,649.29	\$741.59	\$721.59	\$129.79	\$101.24	\$101.24	\$28.55	\$28.55	4.0%
2015-2015 POS ET W/MADV SP	\$1,523.34	\$1,188.20	\$1,208.20	\$335.13	\$315.13	\$1,583.65	\$1,235.25	\$1,255.25	\$348.40	\$328.40	\$60.32	\$47.05	\$47.05	\$13.27	\$13.27	4.0%
2015-2015 POS ET W/ 2 MADV Deps	\$1,752.53	\$1,366.97	\$1,386.97	\$385.56	\$365.56	\$1,821.33	\$1,420.64	\$1,440.64	\$400.69	\$380.69	\$68.81	\$53.67	\$53.67	\$15.14	\$15.14	3.9%
2012-2015 2<65 POS W/MADV SP	\$2,617.91	\$2,041.97	\$2,061.97	\$575.94	\$555.94	\$2,722.06	\$2,123.21	\$2,143.21	\$598.85	\$578.85	\$104.15	\$81.24	\$81.24	\$22.91	\$22.91	4.0%
2012-2015 FAM<65 POS W/MADV SP	\$3,470.28	\$2,706.82	\$2,726.82	\$763.46	\$743.46	\$3,608.56	\$2,814.68	\$2,834.68	\$793.88	\$773.88	\$138.28	\$107.86	\$107.86	\$30.42	\$30.42	4.0%
2012-2015 2<65 POS W/EADV SP	\$2,656.49	\$2,041.97	\$2,061.97	\$614.52	\$594.52	\$2,764.72	\$2,123.21	\$2,143.21	\$641.51	\$621.51	\$108.23	\$81.24	\$81.24	\$26.99	\$26.99	4.1%
2012-2015 POS RET W/EADV	\$1,561.92	\$1,188.20	\$1,208.20	\$373.71	\$353.71	\$1,626.31	\$1,235.25	\$1,255.25	\$391.06	\$371.06	\$64.40	\$47.05	\$47.05	\$17.35	\$17.35	4.1%
2012-2015 POS RET W/HMO MED SP	\$2,098.97	\$1,637.20	\$1,657.20	\$461.77	\$441.77	\$2,183.03	\$1,702.77	\$1,722.77	\$480.26	\$460.26	\$84.06	\$65.57	\$65.57	\$18.49	\$18.49	4.0%
BCBS HMO																
Employee	\$1,136.05	\$886.12	\$906.12	\$249.93	\$229.93	\$1,181.54	\$921.60	\$941.60	\$259.94	\$239.94	\$45.49	\$35.48	\$35.48	\$10.01	\$10.01	4.0%
Employee + 1	\$2,096.82	\$1,635.52	\$1,655.52	\$461.30	\$441.30	\$2,180.79	\$1,701.01	\$1,721.01	\$479.78	\$459.78	\$83.97	\$65.49	\$65.49	\$18.48	\$18.48	4.0%
Family	\$2,845.16	\$2,219.22	\$2,239.22	\$625.93	\$605.93	\$2,959.10	\$2,308.09	\$2,328.09	\$651.01	\$631.01	\$113.94	\$88.87	\$88.87	\$25.07	\$25.07	4.0%
OVER 65																
Kaiser Senior Advantage Plan																
REE-Only	\$175.37	\$136.79	\$0.00	\$38.58	\$0.00	\$175.37	\$136.79	\$0.00	\$38.58	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
REE+1	\$350.74	\$273.58	\$0.00	\$77.16	\$0.00	\$350.74	\$273.58	\$0.00	\$77.16	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
Family	\$526.11	\$410.37	\$0.00	\$115.74	\$0.00	\$526.11	\$410.37	\$0.00	\$115.74	\$0.00	\$0.00	\$0.00		\$0.00		0.0%
SR REE + 1 U65 KP HMO DEP	\$995.95	\$776.84	\$0.00	\$219.11	\$0.00	\$1,040.29	\$811.43	\$0.00	\$228.86	\$0.00	\$44.34	\$34.59		\$9.75		4.5%
REE U65 KP HMO + SR DEP	\$995.95	\$776.84	\$0.00	\$219.11	\$0.00	\$1,040.29	\$811.43	\$0.00	\$228.86	\$0.00	\$44.34	\$34.59		\$9.75		4.5%
Aetna Medicare Advantage - Base																
REE-Only	\$229.19	\$178.77	\$0.00	\$50.42	\$0.00	\$237.68	\$185.39	\$0.00	\$52.29	\$0.00	\$8.49	\$6.62		\$1.87		3.7%
REE+1	\$458.38	\$357.54	\$0.00	\$100.84	\$0.00	\$475.36	\$370.78	\$0.00	\$104.58	\$0.00	\$16.98	\$13.24		\$3.74		3.7%
Family	\$687.57	\$536.30	\$0.00	\$151.27	\$0.00	\$713.04	\$556.17	\$0.00	\$156.87	\$0.00	\$25.47	\$19.87		\$5.60		3.7%
MA REE+SP+1 U65 HMO Dep	\$1,594.43	\$1,243.65	\$0.00	\$350.77	\$0.00	\$1,656.90	\$1,292.38	\$0.00	\$364.52	\$0.00	\$62.47	\$48.73		\$13.75		3.9%
MA REE+SP+2 U65 HMO Deps	\$2,555.20	\$1,993.05	\$0.00	\$562.14	\$0.00	\$2,656.15	\$2,071.79	\$0.00	\$584.36	\$0.00	\$100.95	\$78.74		\$22.21		4.0%
MA REE+1 U65 HMO Dep	\$1,365.24	\$1,064.89	\$0.00	\$300.35	\$0.00	\$1,419.22	\$1,106.99	\$0.00	\$312.23	\$0.00	\$53.98	\$42.10		\$11.88		4.0%
MA REE+2 U65 HMO Deps	\$2,326.01	\$1,814.29	\$0.00	\$511.72	\$0.00	\$2,418.47	\$1,886.40	\$0.00	\$532.07	\$0.00	\$92.46	\$72.11		\$20.35		4.0%
MA SP+U65 HMO REE	\$1,365.24	\$1,064.89	\$0.00	\$300.35	\$0.00	\$1,419.22	\$1,106.99	\$0.00	\$312.23	\$0.00	\$53.98	\$42.10		\$11.88		4.0%
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,326.01	\$1,814.29	\$0.00	\$511.72	\$0.00	\$2,418.47	\$1,886.40	\$0.00	\$532.07	\$0.00	\$92.46	\$72.11		\$20.35		4.0%
MA SP+O65 Ind REE	\$844.79	\$628.16	\$0.00	\$216.63	\$0.00	\$877.94	\$652.78	\$0.00	\$225.16	\$0.00	\$33.14	\$24.62		\$8.52		3.9%
MA REE+1 U65 POS Dep	\$1,523.34	\$1,188.20	\$0.00	\$335.13	\$0.00	\$1,583.65	\$1,235.25	\$0.00	\$348.40	\$0.00	\$60.32	\$47.05		\$13.27		4.0%
MA REE+2 U65 POS Dep	\$2,617.91	\$2,041.97	\$0.00	\$575.94	\$0.00	\$2,722.06	\$2,123.21	\$0.00	\$598.85	\$0.00	\$104.15	\$81.24		\$22.91		4.0%
MA REE+SP+1 U65 POS Dep	\$1,752.53	\$1,366.97	\$0.00	\$385.56	\$0.00	\$1,821.33	\$1,420.64	\$0.00	\$400.69	\$0.00	\$68.81	\$53.67		\$15.14		3.9%
Enhanced Aetna Medicare Advantage - Buy-up																
REE-Only	\$267.77	\$178.77	\$0.00	\$89.00	\$0.00	\$280.34	\$185.39	\$0.00	\$94.95	\$0.00	\$12.57	\$6.62		\$5.95		4.7%
REE+1	\$535.54	\$357.54	\$0.00	\$178.00	\$0.00	\$560.68	\$370.78	\$0.00	\$189.90	\$0.00	\$25.14	\$13.24		\$11.90		4.7%
Family	\$803.31	\$536.30	\$0.00	\$267.01	\$0.00	\$841.02	\$556.17	\$0.00	\$284.85	\$0.00	\$37.71	\$19.87		\$17.84		4.7%

2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness	
MA REE+SP+1 U65 HMO Dep	\$1,671.59	\$1,243.65	\$0.00	\$427.93	\$0.00	\$1,742.22	\$1,292.38	\$0.00	\$449.84	\$0.00	\$70.63	\$48.73		\$21.91		4.2%
MA REE+SP+2 U65 HMO Deps	\$2,632.36	\$1,993.05	\$0.00	\$639.30	\$0.00	\$2,741.47	\$2,071.79	\$0.00	\$669.68	\$0.00	\$109.11	\$78.74		\$30.37		4.1%
MA REE+1 U65 HMO Dep	\$1,403.82	\$1,064.89	\$0.00	\$338.93	\$0.00	\$1,461.88	\$1,106.99	\$0.00	\$354.89	\$0.00	\$58.06	\$42.10		\$15.96		4.1%
MA REE+2 U65 HMO Deps	\$2,364.59	\$1,814.29	\$0.00	\$550.30	\$0.00	\$2,461.13	\$1,886.40	\$0.00	\$574.73	\$0.00	\$96.54	\$72.11		\$24.43		4.1%
MA SP+U65 HMO REE	\$1,403.82	\$1,064.89	\$0.00	\$338.93	\$0.00	\$1,461.88	\$1,106.99	\$0.00	\$354.89	\$0.00	\$58.06	\$42.10		\$15.96		4.1%
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,364.59	\$1,814.29	\$0.00	\$550.30	\$0.00	\$2,461.13	\$1,886.40	\$0.00	\$574.73	\$0.00	\$96.54	\$72.11		\$24.43		4.1%
MA SP+O65 Ind REE	\$883.37	\$628.16	\$0.00	\$255.21	\$0.00	\$920.60	\$652.78	\$0.00	\$267.82	\$0.00	\$37.22	\$24.62		\$12.60		4.2%
MA REE+1 U65 POS Dep	\$1,561.92	\$1,188.20	\$0.00	\$373.71	\$0.00	\$1,626.31	\$1,235.25	\$0.00	\$391.06	\$0.00	\$64.40	\$47.05		\$17.35		4.1%
MA REE+2 U65 POS Dep	\$2,656.49	\$2,041.97	\$0.00	\$614.52	\$0.00	\$2,764.72	\$2,123.21	\$0.00	\$641.51	\$0.00	\$108.23	\$81.24		\$26.99		4.1%
MA REE+SP+1 U65 POS Dep	\$1,829.69	\$1,366.97	\$0.00	\$462.72	\$0.00	\$1,906.65	\$1,420.64	\$0.00	\$486.01	\$0.00	\$76.97	\$53.67		\$23.30		4.2%
BCBS HMO/Medicare																
Employee	\$804.83	\$627.77	\$0.00	\$177.06	\$0.00	\$837.06	\$652.91	\$0.00	\$184.15	\$0.00	\$32.23	\$25.14		\$7.09		4.0%
Family	\$1,520.31	\$1,185.84	\$0.00	\$334.47	\$0.00	\$1,581.19	\$1,233.33	\$0.00	\$347.86	\$0.00	\$60.88	\$47.49		\$13.39		4.0%
BCBS Indemnity/Medicare																
Employee	\$615.60	\$449.39	\$0.00	\$166.21	\$0.00	\$640.26	\$467.39	\$0.00	\$172.87	\$0.00	\$24.65	\$18.00		\$6.65		4.0%
Family	\$1,577.13	\$1,151.30	\$0.00	\$425.82	\$0.00	\$1,640.29	\$1,197.41	\$0.00	\$442.88	\$0.00	\$63.16	\$46.11		\$17.05		4.0%

Fulton County
2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness			
2016 AND AFTER RETIREES																
UNDER 65																
BCBS HSA																
Employee	\$1,013.98	\$811.19	\$831.19	\$202.80	\$182.80	\$1,054.59	\$843.67	\$863.67	\$210.92	\$190.92	\$40.61	\$32.48	\$32.48	\$8.12	\$8.12	4.0%
Employee + 1	\$1,938.35	\$1,550.68	\$1,570.68	\$387.67	\$367.67	\$2,015.97	\$1,612.78	\$1,632.78	\$403.19	\$383.19	\$77.62	\$62.10	\$62.10	\$15.52	\$15.52	4.0%
Family	\$2,586.18	\$2,068.94	\$2,088.94	\$517.24	\$497.24	\$2,689.75	\$2,151.80	\$2,171.80	\$537.95	\$517.95	\$103.57	\$82.86	\$82.86	\$20.71	\$20.71	4.0%
Kaiser HMO																
Employee	\$820.58	\$656.46	\$676.46	\$164.12	\$144.12	\$864.92	\$691.94	\$711.94	\$172.98	\$152.98	\$44.34	\$35.48	\$35.48	\$8.86	\$8.86	5.4%
Employee + 1	\$1,568.63	\$1,254.90	\$1,274.90	\$313.73	\$293.73	\$1,653.38	\$1,322.70	\$1,342.70	\$330.68	\$310.68	\$84.75	\$67.80	\$67.80	\$16.95	\$16.95	5.4%
Family	\$2,094.78	\$1,675.82	\$1,695.82	\$418.96	\$398.96	\$2,207.97	\$1,766.38	\$1,786.38	\$441.59	\$421.59	\$113.19	\$90.56	\$90.56	\$22.63	\$22.63	5.4%
Kaiser Retiree W/EADV SP + HMO Dep	\$1,893.18	\$1,483.68	\$1,503.68	\$409.50	\$389.50	\$1,982.32	\$1,551.73	\$1,571.73	\$430.59	\$410.59	\$89.14	\$68.05	\$68.05	\$21.09	\$21.09	4.7%
BCBS POS																
Employee	\$1,294.15	\$970.61	\$990.61	\$323.54	\$303.54	\$1,345.97	\$1,009.48	\$1,029.48	\$336.49	\$316.49	\$51.83	\$38.87	\$38.87	\$12.96	\$12.96	4.0%
Employee + 1	\$2,388.72	\$1,791.54	\$1,811.54	\$597.18	\$577.18	\$2,484.38	\$1,863.29	\$1,883.29	\$621.09	\$601.09	\$95.66	\$71.75	\$71.75	\$23.91	\$23.91	4.0%
Family	\$3,241.09	\$2,430.82	\$2,450.82	\$810.27	\$790.27	\$3,370.88	\$2,528.16	\$2,548.16	\$842.72	\$822.72	\$129.79	\$97.34	\$97.34	\$32.45	\$32.45	4.0%
BCBS HMO																
Employee	\$1,136.05	\$908.84	\$928.84	\$227.21	\$207.21	\$1,181.54	\$945.24	\$965.24	\$236.30	\$216.30	\$45.49	\$36.40	\$36.40	\$9.09	\$9.09	4.0%
Employee + 1	\$2,096.82	\$1,677.45	\$1,697.45	\$419.36	\$399.36	\$2,180.79	\$1,744.63	\$1,764.63	\$436.16	\$416.16	\$83.97	\$67.18	\$67.18	\$16.79	\$16.79	4.0%
Family	\$2,845.16	\$2,276.13	\$2,296.13	\$569.03	\$549.03	\$2,959.10	\$2,367.28	\$2,387.28	\$591.82	\$571.82	\$113.94	\$91.15	\$91.15	\$22.78	\$22.78	4.0%
REE U65 BCBS HMO + O65 Med Ind SP	\$1,751.65	\$1,370.54	\$1,390.54	\$381.11	\$361.11	\$1,821.80	\$1,425.43	\$1,445.43	\$396.37	\$376.37	\$70.15	\$54.89	\$54.89	\$15.26	\$15.26	4.0%
OVER 65																
Kaiser Senior Advantage Plan																
REE-Only	\$175.37	\$140.30	\$0.00	\$35.07	\$0.00	\$175.37	\$140.30	\$0.00	\$35.07	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%
REE+1	\$350.74	\$280.59	\$0.00	\$70.15	\$0.00	\$350.74	\$280.59	\$0.00	\$70.15	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%
Family	\$526.11	\$420.89	\$0.00	\$105.22	\$0.00	\$526.11	\$420.89	\$0.00	\$105.22	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%
SR REE + 1 U65 KP HMO DEP	\$995.95	\$796.76	\$0.00	\$199.19	\$0.00	\$1,040.29	\$832.24	\$0.00	\$208.05	\$0.00	\$44.34	\$35.48		\$8.86		4.5%
REE U65 KP HMO + SR DEP	\$995.95	\$796.76	\$0.00	\$199.19	\$0.00	\$1,040.29	\$832.24	\$0.00	\$208.05	\$0.00	\$44.34	\$35.48		\$8.86		4.5%
SR REE + U65 DEP FAM SPLIT	\$2,270.15	\$1,816.12	\$0.00	\$454.03	\$0.00	\$2,383.34	\$1,906.68	\$0.00	\$476.66	\$0.00	\$113.19	\$90.56		\$22.63		5.0%
Aetna Medicare Advantage - Base																
REE-Only	\$229.19	\$183.35	\$0.00	\$45.84	\$0.00	\$237.68	\$190.14	\$0.00	\$47.54	\$0.00	\$8.49	\$6.79		\$1.70		3.7%
REE+1	\$458.38	\$366.70	\$0.00	\$91.68	\$0.00	\$475.36	\$380.29	\$0.00	\$95.07	\$0.00	\$16.98	\$13.59		\$3.39		3.7%
Family	\$687.57	\$550.06	\$0.00	\$137.51	\$0.00	\$713.04	\$570.43	\$0.00	\$142.61	\$0.00	\$25.47	\$20.37		\$5.10		3.7%
MA REE+SP+1 U65 HMO Dep	\$1,594.43	\$1,275.54	\$0.00	\$318.89	\$0.00	\$1,656.90	\$1,325.53	\$0.00	\$331.37	\$0.00	\$62.47	\$49.99		\$12.49		3.9%
MA REE+SP+2 U65 HMO Deps	\$2,555.20	\$2,044.16	\$0.00	\$511.04	\$0.00	\$2,656.15	\$2,124.92	\$0.00	\$531.23	\$0.00	\$100.95	\$80.76		\$20.19		4.0%
MA REE+1 U65 HMO Dep	\$1,365.24	\$1,092.19	\$0.00	\$273.05	\$0.00	\$1,419.22	\$1,135.38	\$0.00	\$283.84	\$0.00	\$53.98	\$43.19		\$10.80		4.0%
MA REE+2 U65 HMO Deps	\$2,326.01	\$1,860.81	\$0.00	\$465.20	\$0.00	\$2,418.47	\$1,934.77	\$0.00	\$483.70	\$0.00	\$92.46	\$73.96		\$18.50		4.0%
MA SP+U65 HMO REE	\$1,365.24	\$1,092.19	\$0.00	\$273.05	\$0.00	\$1,419.22	\$1,135.38	\$0.00	\$283.84	\$0.00	\$53.98	\$43.19		\$10.80		4.0%
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,326.01	\$1,860.81	\$0.00	\$465.20	\$0.00	\$2,418.47	\$1,934.77	\$0.00	\$483.70	\$0.00	\$92.46	\$73.96		\$18.50		4.0%
MA SP+O65 Ind REE	\$844.79	\$645.05	\$0.00	\$199.74	\$0.00	\$877.94	\$670.33	\$0.00	\$207.61	\$0.00	\$33.14	\$25.28		\$7.87		3.9%
MA REE+1 U65 POS Dep	\$1,523.34	\$1,153.96	\$0.00	\$369.37	\$0.00	\$1,583.65	\$1,199.62	\$0.00	\$384.03	\$0.00	\$60.32	\$45.66		\$14.66		4.0%
MA REE+2 U65 POS Dep	\$2,617.91	\$1,974.89	\$0.00	\$643.02	\$0.00	\$2,722.06	\$2,053.43	\$0.00	\$668.63	\$0.00	\$104.15	\$78.54		\$25.61		4.0%
MA REE+SP+1 U65 POS Dep	\$1,752.53	\$1,337.31	\$0.00	\$415.21	\$0.00	\$1,821.33	\$1,389.77	\$0.00	\$431.56	\$0.00	\$68.81	\$52.46		\$16.35		3.9%
Enhanced Aetna Medicare Advantage - Buy-up																
REE-Only	\$267.77	\$183.35	\$0.00	\$84.42	\$0.00	\$280.34	\$190.14	\$0.00	\$90.20	\$0.00	\$12.57	\$6.79		\$5.78		4.7%
REE+1	\$535.54	\$366.70	\$0.00	\$168.84	\$0.00	\$560.68	\$380.29	\$0.00	\$180.39	\$0.00	\$25.14	\$13.59		\$11.55		4.7%
Family	\$803.31	\$550.06	\$0.00	\$253.25	\$0.00	\$841.02	\$570.43	\$0.00	\$270.59	\$0.00	\$37.71	\$20.37		\$17.34		4.7%
MA REE+SP+1 U65 HMO Dep	\$1,671.59	\$1,275.54	\$0.00	\$396.05	\$0.00	\$1,742.22	\$1,325.53	\$0.00	\$416.69	\$0.00	\$70.63	\$49.99		\$20.65		4.2%
MA REE+SP+2 U65 HMO Deps	\$2,632.36	\$2,044.16	\$0.00	\$588.20	\$0.00	\$2,741.47	\$2,124.92	\$0.00	\$616.55	\$0.00	\$109.11	\$80.76		\$28.35		4.1%
MA REE+1 U65 HMO Dep	\$1,403.82	\$1,092.19	\$0.00	\$311.63	\$0.00	\$1,461.88	\$1,135.38	\$0.00	\$326.50	\$0.00	\$58.06	\$43.19		\$14.88		4.1%
MA REE+2 U65 HMO Deps	\$2,364.59	\$1,860.81	\$0.00	\$503.78	\$0.00	\$2,461.13	\$1,934.77	\$0.00	\$526.36	\$0.00	\$96.54	\$73.96		\$22.58		4.1%
MA SP+U65 HMO REE	\$1,403.82	\$1,092.19	\$0.00	\$311.63	\$0.00	\$1,461.88	\$1,135.38	\$0.00	\$326.50	\$0.00	\$58.06	\$43.19		\$14.88		4.1%

2022 VS 2023 Monthly Medical Premium Rates Comparison

	PY 2022 - Monthly Rates					PY 2023 - Monthly Rates					Monthly Rate Change - 2023 vs. 2022					Estimated % change
	Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		Total Premium	County Cost		Employee Contribution		
		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness		w/o Wellness	w/ Wellness	w/o Wellness	w/ Wellness	
MA SP+U65 HMO REE+1 U65 HMO Dep	\$2,364.59	\$1,860.81	\$0.00	\$503.78	\$0.00	\$2,461.13	\$1,934.77	\$0.00	\$526.36	\$0.00	\$96.54	\$73.96		\$22.58		4.1%
MA SP+O65 Ind REE	\$883.37	\$645.05	\$0.00	\$238.32	\$0.00	\$920.60	\$670.33	\$0.00	\$250.27	\$0.00	\$37.22	\$25.28		\$11.95		4.2%
MA REE+1 U65 POS Dep	\$1,561.92	\$1,153.96	\$0.00	\$407.95	\$0.00	\$1,626.31	\$1,199.62	\$0.00	\$426.69	\$0.00	\$64.40	\$45.66		\$18.74		4.1%
MA REE+2 U65 POS Dep	\$2,656.49	\$1,974.89	\$0.00	\$681.60	\$0.00	\$2,764.72	\$2,053.43	\$0.00	\$711.29	\$0.00	\$108.23	\$78.54		\$29.69		4.1%
MA REE+SP+1 U65 POS Dep	\$1,829.69	\$1,337.31	\$0.00	\$492.37	\$0.00	\$1,906.65	\$1,389.77	\$0.00	\$516.88	\$0.00	\$76.97	\$52.46		\$24.51		4.2%
BCBS HMO/Medicare																
Employee	\$804.83	\$643.86	\$0.00	\$160.97	\$0.00	\$837.06	\$669.65	\$0.00	\$167.41	\$0.00	\$32.23	\$25.79		\$6.44		4.0%
Family	\$1,520.31	\$1,216.24	\$0.00	\$304.06	\$0.00	\$1,581.19	\$1,264.95	\$0.00	\$316.24	\$0.00	\$60.88	\$48.71		\$12.18		4.0%
BCBS Indemnity/Medicare																
Employee	\$615.60	\$461.70	\$0.00	\$153.90	\$0.00	\$640.26	\$480.19	\$0.00	\$160.07	\$0.00	\$24.65	\$18.49		\$6.16		4.0%
Family	\$1,577.13	\$1,182.85	\$0.00	\$394.28	\$0.00	\$1,640.29	\$1,230.22	\$0.00	\$410.07	\$0.00	\$63.16	\$47.37		\$15.78		4.0%