## Commonwealth of Virginia Retiree Health Benefits Program

## **Medicare Retiree Monthly Premiums**

(Effective January 1 – December 31, 2025)

PLAN	ONE PERSON	TWO PERSONS
4.4 . 05	<b>***</b>	<b>A=00</b>
Advantage 65	\$295	\$590
Advantage 65 + Dental/Vision	\$350	\$700
Advantage 65 – Medical Only**	\$177	\$354
Advantage 65 – Medical Only +	\$232	\$464
Dental/Vision**		

<sup>\*\*</sup>These plans do not include prescription drug coverage

NOT AVAILABLE TO NEW ENROLLEES		
Option II – Medicare Supplemental	\$385	\$770
Option II + Dental/Vision	\$440	\$880

Two persons may choose the same plan or different Medicare-eligible plans; the total premium is the sum of each selection.

**Important:** Timely payment of the total premium is the State retiree group member's responsibility whether the premium is withheld from a retirement benefit or billed directly by the health plan. Failure to pay premiums within 31 days of the due date will result in termination of coverage.

