



# 2026 Health Care Coverage & HRA

## Health Reimbursement Arrangement - Non-Medicare (Contact Via Benefits at 1.800.667.2184)

HPRS Pre-Medicare HRA Allowance for Retirees			
	Base = \$800.00		
*Total HCSC	% of Base	Monthly HRA Amount	Annual HRA Amount
20	61%	\$488	\$5,856
21	64%	\$512	\$6,144
22	67%	\$536	\$6,432
23	70%	\$560	\$6,720
24	73%	\$584	\$7,008
25	76%	\$608	\$7,296
26	79%	\$632	\$7,584
27	82%	\$656	\$7,872
28	85%	\$680	\$8,160
29	88%	\$704	\$8,448
30	91%	\$728	\$8,736
31	94%	\$752	\$9,024
32	97%	\$776	\$9,312
33+	100%	\$800	\$9,600

\* Health Care service credit includes (HCSC): HPRS service credit, DROP participation time, purchased interrupted military service credit, and purchased or transferred OP&F service credit.

### Disability Retirees:

- In-the-line-of-duty disability retirees receive the 25 years of HCSC allowance, unless they have earned more.
- Not-in-the-line-of-duty disability retirees with 20 or less HCSC will receive the minimum HRA amount (61% of Base).

**Surviving Spouses** receive an HRA in the amount of \$350 per month (if qualify).

## Health Reimbursement Arrangement - Medicare (Contact Via Benefits at 1.833.431.1358)

HPRS Medicare HRA Allowance for Retirees & Surviving Spouses		
	Monthly HRA Amount	Annual HRA Amount
Retiree	\$225.00	\$2,700.00
Surviving Spouse	\$112.50	\$1,350.00

### Dental & Vision

	Monthly Retiree Premium	Monthly Spouse Premium	Monthly Dependent Child Premium*	Monthly Surviving Spouse Premium	Monthly Surviving Children Premium
Dental	\$10	\$25	\$25	\$10	\$10
Vision	\$8	\$10	\$10	\$8	\$8

\*A single Dental & Vision premium provides coverage for all dependent children regardless of number.