



2027 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 = \$900.00		
*Total HCSC	% of Base	Monthly HRA Amount	Annual HRA Amount
20	61%	\$549	\$6,588
21	64%	\$576	\$6,912
22	67%	\$603	\$7,236
23	70%	\$630	\$7,560
24	73%	\$657	\$7,884
25	76%	\$684	\$8,208
26	79%	\$711	\$8,532
27	82%	\$738	\$8,856
28	85%	\$765	\$9,180
29	88%	\$792	\$9,504
30	91%	\$819	\$9,828
31	94%	\$846	\$10,152
32	97%	\$873	\$10,476
33+	100%	\$900	\$10,800

* 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 \$375 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	\$255.00	\$3,060.00
Surviving Spouse	\$127.50	\$1,530.00

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.