



2025 Retiree Benefit Premiums

Under Age 65 Medical/RX/Vision Premiums

Under Age 65 Medical/RX/Vision Premiums		
Prime Select with Basic Vision	*Shared Cost Per Month	Full Cost Per Month
Single	\$271.27	\$1,085.08
Dual	\$542.54	\$2,170.16
Family	\$813.81	\$3,255.24
Prime Select with Enhanced Vision	*Enhanced Vision Shared Cost Per Month	Full Cost Per Month
Single	\$275.63	\$1,089.44
Dual	\$551.27	\$2,178.89
Family	\$826.90	\$3,268.33
Consumer Choice with Basic Vision	*Shared Cost Per Month	Full Cost Per Month
Single	\$97.61	\$574.17
Dual	\$195.22	\$1,148.33
Family	\$292.83	\$1,722.50
Consumer Choice with Enhanced Vision	*Enhanced Vision Shared Cost Per Month	Full Cost Per Month
Single	\$101.97	\$578.53
Dual	\$203.95	\$1,157.06
Family	\$305.92	\$1,735.59

Under Age 65 Dental Premiums

Under Age 65 Dental Premiums		
Delta Dental Basic Plan	*Shared Cost Per Month	Full Cost Per Month
Single	\$8.90	\$35.60
Dual	\$17.80	\$71.20
Family	\$26.70	\$106.80
Delta Dental Enhanced Plan	*Shared Cost Per Month	Full Cost Per Month
Single	\$18.69	\$45.39
Dual	\$37.38	\$90.78
Family	\$56.07	\$136.17

*Retirees hired prior to 4/1/2012 with at least 10 years full-time service are eligible for shared cost. Otherwise, retirees pay full cost.

October 2024



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Over Age 65 Prescription Drug Plan Premiums and HRA Funding Amount

RX Drug Plan	*Shared Cost Per Month	Full Cost Per Month
Single	\$102.00	\$204.00
Dual	\$204.00	\$408.00

Health Reimbursement Arrangement (HRA)	*ORNL Contribution (prorated for number of months in the plan)
Single	\$792.00
Dual	\$1,584.00

REMINDER: ORNL's Medicare Supplement Program includes continuous enrollment in a Medicare supplement plan through Via Benefits, receiving benefit dollars from ORNL through an HRA, and enrollment in ORNL's prescription drug plan through Express Scripts.

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