

2023 RETIREE SCHEDULE OF BENEFITS						
Benefit Plan Option	Class I Retiree*		Class II Retiree		Class III Retiree	
	High	Low	High	Low	High	Low
Medical Plan Option - <b>Doctor Visit Copays -</b>						
Kaiser (California only)	\$15 copay	\$25 copay <sup>1</sup>	\$15 copay	\$25 copay <sup>1</sup>	\$15 copay	\$25 copay <sup>1</sup>
UnitedHealthcare (California only)	\$15 copay <sup>2</sup>	\$25 copay <sup>1</sup>	\$15 copay <sup>2</sup>	\$25 copay <sup>1</sup>	\$15 copay <sup>2</sup>	\$25 copay <sup>1</sup>
Prescription Drugs HMO Plans	Refer to Medical Comparison		Refer to Medical Comparison		Refer to Medical Comparison	
Dental Plans (Self-Pay)						
Prepaid DHMO	CIGNA		CIGNA		CIGNA	
Indemnity	CIGNA		CIGNA		CIGNA	
Vision (Self-Pay)						
Prepaid (Optional)	EYEMed Services		EYEMed Services		EYEMed Services	
	Vision Service Plan (VSP)		Vision Service Plan (VSP)		Vision Service Plan (VSP)	

<sup>1</sup> Non-Medicare Retirees - \$25 copay

<sup>2</sup> Non-Medicare Retirees - \$15 copay