



2020 JHU Retiree Premiums For Bargaining Unit Members

Monthly Premiums as of April 1, 2020 – March 31, 2021

Coverage		Retirees (under age 65)								Retirees (age 65 or over)							
		Ind		Adult+ Child(ren)		Ind +Spouse		2 Adults+ Child(ren)		Ind		Adult+ Child(ren)		Ind +Spouse		2 Adults+ Child(ren)	
		JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay
Age + Service* =	80	\$208	\$955	\$312	\$1,430	\$416	\$1,908	\$520	\$2,500	\$151	\$501	\$227	\$749	\$302	\$1,000	\$378	\$1,313
	79	\$177	\$987	\$265	\$1,477	\$354	\$1,970	\$442	\$2,578	\$128	\$524	\$193	\$783	\$257	\$1,045	\$321	\$1,370
	78	\$146	\$1,018	\$218	\$1,524	\$291	\$2,033	\$364	\$2,656	\$106	\$546	\$159	\$817	\$211	\$1,090	\$265	\$1,427
	77	\$114	\$1,049	\$172	\$1,570	\$229	\$2,095	\$286	\$2,734	\$83	\$569	\$125	\$851	\$166	\$1,136	\$208	\$1,484
	76	\$83	\$1,080	\$125	\$1,617	\$166	\$2,158	\$208	\$2,812	\$60	\$591	\$91	\$885	\$121	\$1,181	\$151	\$1,540
	75	\$52	\$1,111	\$78	\$1,664	\$104	\$2,220	\$130	\$2,890	\$38	\$614	\$57	\$919	\$76	\$1,226	\$95	\$1,597
	<75	\$0	\$1,163	\$0	\$1,742	\$0	\$2,324	\$0	\$3,020	\$0	\$652	\$0	\$976	\$0	\$1,302	\$0	\$1,691

Coverage		Retirees (under age 65)								Retirees (age 65 or over)							
		Ind		Adult+ Child(ren)		Ind +Spouse		2 Adults+ Child(ren)		Ind		Adult+ Child(ren)		Ind +Spouse		2 Adults+ Child(ren)	
		JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay	JHU Pays	You Pay
Age + Service* =	80	\$208	\$1,128	\$312	\$1,691	\$416	\$2,258	\$520	\$2,953	\$151	\$599	N/A	N/A	\$302	\$1,195	N/A	N/A
	79	\$177	\$1,160	\$265	\$1,738	\$354	\$2,320	\$442	\$3,031	\$128	\$621	N/A	N/A	\$257	\$1,240	N/A	N/A
	78	\$146	\$1,191	\$218	\$1,784	\$291	\$2,382	\$364	\$3,109	\$106	\$644	N/A	N/A	\$211	\$1,285	N/A	N/A
	77	\$114	\$1,222	\$172	\$1,831	\$229	\$2,445	\$286	\$3,187	\$83	\$667	N/A	N/A	\$166	\$1,330	N/A	N/A
	76	\$83	\$1,253	\$125	\$1,878	\$166	\$2,507	\$208	\$3,265	\$60	\$689	N/A	N/A	\$121	\$1,376	N/A	N/A
	75	\$52	\$1,284	\$78	\$1,925	\$104	\$2,570	\$130	\$3,343	\$38	\$712	N/A	N/A	\$76	\$1,421	N/A	N/A
	<75	\$0	\$1,336	\$0	\$2,003	\$0	\$2,674	\$0	\$3,473	\$0	\$750	N/A	N/A	\$0	\$1,497	N/A	N/A



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Dental				
	Ind	Adult+ Child(ren)	Ind +Spouse	2 Adults+ Child(ren)
Delta Dental Enhanced	\$30	\$60	\$65	\$131
Delta Dental Standard	\$22	\$44	\$47	\$96

Note: Start with current age to determine the column at the top, and then add age and service together to determine the plan premiums by level.

* "Service" 10 or more years of continuous, full-time employment with JHU immediately prior to retirement including any prior employment, which must be in blocks of 10 or more years of continuous full-time service.