

State Government Retiree Health Benefits: Current Status and Potential Impact of New Accounting Standards

Appendix A:

Key Characteristics Of State Government Retiree Health Insurance Plans

The information in this Appendix is taken directly from survey responses and documents provided by state governments. The terms used are those that the states themselves use to describe their benefits. As such, not all of the acronyms and terms may be ones in general use.

by
**Stan Wisniewski, Ph.D. J.D. and
Lorel Wisniewski, Ph.D.
Workplace Economics, Inc.**

Table A1: Number and Types of Plans, FY 2003

State	Number of Plans		Types of Plans	
	Pre-Medicare	Medicare-eligible Plans	Pre-Medicare	Medicare-eligible Plans
Alabama	1	1	PPO with out-of-network option	PPO with out-of-network option
Alaska	1	1	Traditional indemnity.	Traditional indemnity.
Arizona ¹	5	6	2 HMOs, 2 PPOs, 1 POS	3 Medicare plans, 1 PPO, 1 POS, 1 HMO
Arkansas	5	5	1 PPO (BCBS), 2 POS, 2 HMO	1 PPO (BCBS), 2 POS, 2 HMO
California	8	7	HMOs, PPOs, EPOs (Exclusive Provider Organizations)	Medicare supplement, managed care
Colorado	16	4	3 POS, 9 HMOs (3 providers), 4 PPOs	2 Medicare supplement, 2 HMO
Connecticut	10	10	4 POS, 4 HMOs, 2 POE (Point of Enrollment plan, with services available from defined network of providers only)	4 POS, 4 HMOs, 2 POE (Point of Enrollment plan, with services available from defined network of providers only)
Delaware	5	8	3 traditional, 2 HMOs	3 traditional, 2 HMOs, 3 Medicare supplements
Florida	2	2	PPO and HMO	PPO and HMO
Georgia	10	11	2 PPOs, 1 Indemnity, 7 HMOs	2 PPOs, 1 Indemnity, 7 HMOs, 1 Medicare HMO
Hawaii ²				
Idaho	1	1	Traditional	Traditional
Illinois	12	12	1 indemnity, 11 managed care options (HMO, POS, open access) that vary by county	1 indemnity, 11 managed care options (HMO, POS, open access) that vary by county
Indiana	6	0	1 indemnity, 5 HMOs	None
Iowa ³	10	10	2 indemnity, 2 PPOs, 6 managed care	2 indemnity, 2 PPOs, 6 managed care
Kansas	7	8	1 managed indemnity, 4 HMOs, 2 PPOs	1 managed indemnity, 4 HMOs, 2 PPOs, 1 Medicare Plan C Supplement
Kentucky	14	3	4 HMOs, 3 POS, 4 PPOs, 4 EPOs; offerings vary by county	1 Medicare supplement, 1 PPO, 1 traditional; each with low and high options
Louisiana	7	7	1 PPO and EPO statewide; 5 other plans in limited areas	1 PPO and EPO statewide; 5 other plans in limited areas
Maine	1	1	HMO	Medicare HMO companion
Maryland	8	8	2 PPOs, 3 POS, 3 HMOs	2 PPOs, 3 POS, 3 HMOs
Massachusetts	10	6	3 indemnity, 1 PPO, 6 HMOs	2 Medicare indemnity, 4 Medicare HMOs

¹ Arizona: For Maricopa County. Arizona State Retirement System and state Department of Administration each offer separate sets of plans.

² Hawaii: The state of Hawaii has created an Employer-Union Health Benefits Trust Fund, effective July 1, 2003. The Fund will offer multiple options for pre-Medicare and Medicare-eligible retirees. The Fund replaces the current system under which retirees can select from a variety of plans offered by both the state and the state employee unions.

³ Iowa: Options may vary by bargaining unit status while active employee.

Table A1: Number and Types of Plans, FY 2003

State	Number of Plans		Types of Plans	
	Pre-Medicare	Medicare-eligible Plans	Pre-Medicare	Medicare-eligible Plans
Michigan	11	11	State PPO, 12 HMOs in limited areas	State PPO, 12 HMOs in limited areas
Minnesota	1	1	Single network-type State Health Plan with 3 administrators	Medicare plans coordinated with State Health Plan
Mississippi	1	1	Single network-type plan	Medicare coordinated network plan
Missouri	8	8	“Copay plan” (similar to PPO with non-network option), 7 HMOs vary by region	“Copay plan” (similar to PPO with non-network option), 7 HMOs vary by region
Montana	5	5	Traditional and basic indemnity, 3 HMOs in limited areas	Traditional plan or its Medicare supplement, 3 HMOs in limited areas
Nebraska	3	0	1 POS, 1 PPO, 1 HMO	None
Nevada	2	2	State PPO, 1 HMO (limited service area)	State PPO, 1 Medicare HMO (limited service area)
New Hampshire	1	1	POS plan	Medicare supplement plan
New Jersey	7	7	1 traditional, 1 managed care, 5 HMOs	1 traditional, 1 managed care, 5 HMOs
New Mexico	4	6	2 POS, 2 HMOs	2 traditional, 2 supplement, 2 HMO
New York	7-8	7-8	1 traditional plan, 6-7 HMOs per regions	1 traditional plan, 6-7 HMOs per region
North Carolina	1	1	State comprehensive major medical plan	State comprehensive major medical plan
North Dakota	1	1	PPO (basic benefits)	NDPERS Retiree Plan (PPO)
Ohio	6	6	1 traditional (2 administrators), 5 HMOs in limited areas	1 traditional (2 administrators), 5 HMOs in limited areas
Oklahoma	6	5	Indemnity, 2 HMOs; all plans with high and low options	Medicare supplements: 2 indemnity with high and low options and 1 HMO
Oregon	10	5	Through state: PPO high and low option, HMO high and low option, 1 HMO/POS. Through retirement system: 1 indemnity, 1 PPO, 1 POS, 2 HMO/managed care	1 indemnity, 1 PPO, 1 POS, 2 HMO/managed care
Pennsylvania	3	3	Basic Option (indemnity), regional HMO and PPO options	Medicare supplement with major medical; HMO and PPO option in some areas
Rhode Island	1	2	PPO	1 indemnity, 1 Medigap
South Carolina	7	7	2 indemnity (state plans), 2 HMO, 2 managed care (HMO/POS)	1 indemnity, 1 Medicare supplement, 2 HMO, 2 managed care (HMO/POS)
South Dakota	3	1	3 PPOs	Medicare supplement
Tennessee	4	3	1 PPO, 1 POS, 2 HMOs	2 Medigap plans, 1 PPO
Texas	4	4	1 PPO with HMO option, 3 HMOs in limited areas	1 indemnity, 3 HMOs in limited areas
Utah	4	2	1 PPO, 2 HMOs, 1 indemnity	2 Medicare supplements

Table A1: Number and Types of Plans, FY 2003

State	Number of Plans		Types of Plans	
	Pre-Medicare	Medicare-eligible Plans	Pre-Medicare	Medicare-eligible Plans
Vermont	4	2	1 indemnity, 1 POS, 1 PPO, 1 catastrophic	1 indemnity, 1 PPO
Virginia	7	1	3 statewide, 4 regional HMOs & POS	Medicare supplement; 2 additional supplements no longer available to new enrollees. ⁴
Washington	7	9	4 HMOs, 2 POS, 1 PPO	4 HMOs, 2 POS, 1 PPO, plus 2 Medicare supplement plans (E and J)
West Virginia	3-5	1	1 PPO, 2-4 HMOs depending on region	1 Medicare supplement
Wisconsin	21	21	17 HMOs, 4 fee-for-service	17 HMOs, 4 fee-for-service (1 Medicare supplement in place of standard plan)
Wyoming	1	1	PPO	PPO

⁴ Virginia: Drug-only, dental/vision-only, or drug/dental/vision-only plans available in place of medical plan.

Table A2: Eligibility Requirements for Plan Participation, FY 2003

State	Eligibility Requirements	Medicare Enrollment Required ¹
Alabama	Those with 10 yrs state service and receiving monthly benefit from Employees' Retirement System, Teachers' Retirement System or Judicial Retirement System.	Yes
Alaska	PERS retirees. No cost to retiree if hired before 7/1/86 or to anyone age 65 or greater. Retirees first hired after 6/30/86 who retire prior to age 60 (or prior to age 65 with less than ten years of credited service for those first hired after 7/1/96) may receive retiree health care insurance by paying the full cost of the premium. Retirees first hired after 6/30/86 who retire at age 60-64 (or prior to age 65 with more than ten years of credited service) may receive retiree health insurance by paying half of the premium cost.	Yes
Arizona	Those retired and collecting a pension from an Arizona state retirement system.	Yes
Arkansas	State retirees.	Yes
California	Those retired within 120 days of separation from state job in which were employed at least ½ time for at least 6 months and one day. Retirees hired before 1/1/85 or retiring with at least 20 years service receive 100% of the state subsidy.	Yes
Colorado	Those receiving a benefit from the Colorado Public Employee Retirement System.	Yes
Connecticut	Health care benefit provided to all retirees.	Yes
Delaware	State pays 100% for retirees hired before 7/1/91. For those hired 7/1/91 or later, state pays portion based on service at retirement; retirees with less than 10 years service pay 100%.	Yes
Florida	Retirees eligible upon retirement from state service and enrollment in retire health plan. Eligible for subsidy upon proof of insurance coverage, which can include Medicare.	Yes
Georgia	Retired teachers, school personnel, state employees and dependents.	Yes
Hawaii	Retired members of state employee retirement system	Yes
Idaho	State employees eligible to retire under Public Employee Retirement System of Idaho (PERSI), whose unreduced regular retirement allowance at the time of retirement must equal or exceed the single retiree health insurance premium. Must enroll within 60 days of retirement.	Yes
Illinois	Those retired from state service with at least 8 years creditable service. State pays 100% of premium for retirees with at least 20 years service, and pays 5% per year of service for those retiring with less than 20 years.	Yes
Indiana	Pre-Medicare retirees may purchase continued coverage in state plan. No coverage in state plan past age 65.	N/A
Iowa	State retirees	Yes
Kansas	Recipients of retirement benefit through State of Kansas.	Yes
Kentucky	Retirees drawing a check from the KY Retirement Systems, Teachers Retirement System, Judicial Retirement Plan or Legislators Retirement Plan	Yes
Louisiana	Retirees of participant employers. Retirees must be vested in health insurance plan prior to retirement to receive maximum state subsidy of 75%. ²	Yes ³

¹ A "Yes" answer indicates that Medicare-eligible retirees who do not enroll are treated "as if" they had enrolled in Medicare under the state health plan. "N/A" answer indicates that either the information was not available or not applicable to this state (e.g., the state offers no Medicare-eligible plan, therefore the question of required Medicare enrollment for plan eligibility is moot.

² Louisiana: Those enrolled prior to 12/31/01 receive maximum (75%) subsidy. Later enrollees receive retiree health care subsidy according to the following vesting schedule: 10 or fewer years-19%, 10 up to 15 years-38%, 15 up to 20 years-56%, 20 or more years-75%.

Table A2: Eligibility Requirements for Plan Participation, FY 2003

State	Eligibility Requirements	Medicare Enrollment Required ¹
Maine	State funds postretirement health care benefits for most state employees, legislators and portion of teachers' premium. State pays 100% of premium for retirees hired before 7/1/91 or for those with 10 or more years coverage in the state health plan.	Yes
Maryland	Health care coverage for those retired before 7/1/84, or those retired 7/1/84 or later with at least 5 years creditable service. State subsidy for retirees with at least 16 years creditable service, for those who directly retire from the state with at least 5 years and for employees who leave state service within 5 years of normal retirement age and with at least 10 years of creditable service. For less than 16 years, state pays 0.52% of subsidy for each month of creditable service; for 16 or more years of service state pays full subsidy equal to the amount of subsidy paid by the state for active employees.	Yes
Massachusetts	State retirees.	Yes
Michigan	Retirees of State Employee Retirement System, Judges Retirement System, State Police Retirement System and Legislative Retirement System. State pays 100% for retirees who were hired before 4/1/97 and are Medicare-eligible; 95 % if under 65. State pays 3% per year of service for retirees hired 4/1/97 or later. State pays 100% of premium for pre-Medicare retirees in the Legislative Retirement System.	Yes
Minnesota	State retirees. Must enroll within 60 days preceding retirement date.	Yes ⁴
Mississippi	Retirees who, as active employees enrolled in plan, participate in retirement plan approved by Public Employees' Retirement System and have at least 25 years of creditable service, or are at least age 60 with 4 or more years service, or are approved for disability retirement benefits. Must enroll within 31 days of retirement date.	Yes
Missouri	Retirees who, at time of termination of state employment, were eligible to receive retirement benefit from Missouri State Employees' Retirement System or Public School Employees' Retirement System for State Employees, and have been covered under the state plan at least since the last enrollment period or have proof of coverage elsewhere for the prior 6 months. Must enroll no later than 31 days after retirement date.	Yes
Montana	Any employees eligible to retire from the Montana Public Employees Retiree Administration.	Yes
Nebraska	Pre-Medicare retirees may purchase continued coverage in state plan. No coverage in state plan past age 65.	N/A
Nevada	Retired state employees receiving a benefit from the Public Employees' Retirement System, Retirement Plan Annuities, Judges Retirement, Legislative Retirement, LTD plan, or their surviving dependents. Must enroll within 60 days.	Yes
New Hampshire	Those retired with at least 30 years of service at any age, or retired with 10 or more years of service if at least age 60, or retired from vested deferred retirement and are at least age 60, or attained age 60 after early retirement. For certain employees, retired from vested deferred retirement, at point when 20 years of service would have been completed but not before the age of 45. Effective 7/1/02, post-retirement medical plan subsidy was extended to state retirees age 60 with 20 or more years of service, or age 55-59 with 30 or more years of service.	Yes

³ Louisiana: Plan requires written confirmation from Social Security Administration if retiree is *not* eligible for Medicare; otherwise charges will be reduced by Medicare payment amounts.

⁴ Minnesota: Retirees not eligible for Medicare may remain with the state group but pay premiums directly to the carriers at the same rate as under age 65 retirees.

Table A2: Eligibility Requirements for Plan Participation, FY 2003

State	Eligibility Requirements	Medicare Enrollment Required ¹
New Jersey	State retirees. Retirees with 25 or more years of service receive 100% premium subsidy.	Yes
New Mexico	Those retired with normal or disability pension from public service before employers' effective participation date in the NM Retiree Health Care Authority, or with retiree and/or employer contribution to NM Retiree Health Care Authority for at least 5 years before retirement date, or retiree and/or employer contribution to NM Retiree Health Care Authority from date of employer's participation in program until retirement date. Must enroll within 31 days of retirement date.	Yes ⁵
New York	Those qualified to retire as member of a retirement system administered by NY State, with minimum 5 years state service if hired before 4/1/75 or minimum 10 years state service if hired 4/1/75 or later, and enrolled in state health plan at time of retirement. May defer coverage and reenroll later.	Yes
North Carolina	Retired state employees.	Yes ⁶
North Dakota	State pre-Medicare retirees can continue coverage in EPO through COBRA, then participate in state PPO at basic level if receiving retirement benefits. Medicare-eligible retirees may participate in ND Public Employee Retirement System Retiree Health Plan. Retirees with PERS, Highway Patrolman's Retirement System or the Defined Contribution Retirement Plan are eligible for credit.	Yes
Ohio	State retirees with at least 10 years service.	Yes ⁷
Oklahoma	Former employees already enrolled in one of the health plans. Must apply 90 days before retirement	Yes
Oregon	Pre-Medicare individuals receiving or eligible to receive a service retirement allowance may enroll in health plans through the Public Employee Benefits Board or through the Public Employee Retirement System (PERS). Pre-Medicare state retirees may receive subsidy based on years of service. Upon attaining Medicare eligibility, retirees lose eligibility for health care through PEBB, but may enroll in a health plan through PERS. Medicare-eligible retirees may enroll in a health plan through PERS within 90 days following retirement or after date of Medicare eligibility, or after 24 months of consecutive coverage under another group plan. Medicare-eligible recipients of PERS pension benefit with at least 8 years service at retirement may receive subsidy from Retirement Health Insurance Account.	Yes
Pennsylvania	State annuitants who were covered under the health plan as an employee or dependent on his/her last day of work may enroll in the Retired Employees Health Program. State annuitants who become dependent subscribers under a spouse's coverage may re-enroll if the spouse's coverage ceases. Most state retirees with 25 years service and those retiring at the normal retirement age with 15 or more years of service qualify for the full state subsidy (100%).	Yes

⁵ New Mexico: Retirees not eligible for Part A may purchase Part B and enroll in a pre-Medicare plan if they provide the NM Retiree Health Care Authority with written notice from the Social Security Administration confirming the retiree's non-eligibility for Medicare. Those not purchasing Part B will remain enrolled in the BCBS Triple Option POS plan with state payments made as if the retiree were covered by Medicare Part A.

⁶ North Carolina: Retirees not eligible for Medicare must provide written documentation from the Social Security Administration in order to retain coverage.

⁷ Ohio: Retirees not eligible for Medicare Part A may participate in traditional plans only at additional cost upon submission of written confirmation from the Social Security Administration of ineligibility for Medicare Part A.

Table A2: Eligibility Requirements for Plan Participation, FY 2003

State	Eligibility Requirements	Medicare Enrollment Required ¹
Rhode Island	Retired state employees. State subsidy depends on age and service at retirement. Pre-Medicare subsidies: retirees with less than 28 years service must be age 60 to receive any subsidy; retirees with 28 years but less than age 60 receive 90% subsidy. Full subsidy (100%) for retirees with at least 28 years and age 60 or older, or for retirees with 35 years service at any age. Medicare-eligible retirees receive full subsidy at age 65 with 28 or more years.	Yes ⁸
South Carolina	Covered employees may enroll within 31 days of retirement or during later open enrollment periods. To receive state funded benefits, must be eligible to retire with at least 5 years service with a participating state entity.	Yes ⁹
South Dakota	Former employees covered under the state health plan and who are entitled to immediate retirement benefits may continue coverage in the state health plan until age 65, then they may convert to the state sponsored Medicare supplement plan.	Yes
Tennessee	State retirees may retain coverage until age 65. At age 65, retirees may enroll in state sponsored Medicare supplement plans. For Medicare-eligible retirees, state pays \$40/month for retirees with 30 or more years service, \$30/month for retirees with 20-29 years service, \$20/month for retirees with 15-19 years service and \$0 for retirees with less than 15 years. Pre-Medicare retirees receive state contribution on same basis as active employees.	Yes
Texas	Retirees with at least 10 years of state service; state subsidizes full cost for individual coverage.	Yes
Utah	Retirees under 65 may continue coverage on same basis as active employees; coverage ends when retiree attains age 65 or after 5 years. Retirees attaining age 65 may enroll in high- or low-option Medicare supplement plan for which retiree pays full premium. Medicare members may only switch between low- and high-option every 2 years.	Yes
Vermont	Retiring employees may continue coverage by paying 20% share of premium.	Yes
Virginia	Retiring state employees who are eligible for annuity and will receive (not defer) annuity immediately upon retirement may enroll in health plan within 31 days of retirement. Retirees are automatically enrolled in Advantage 65 Medicare supplement plan upon attaining age 65. Minimum 15 years of service at retirement required to receive commonwealth subsidy.	Yes
Washington	Retiring state, higher education, school district or political subdivision employees. Employees retiring under most state retirement plans must immediately begin receiving a retirement allowance. Employees retiring under PERS III, TRS III or SERS III must be age 55 with 10 years of service, and higher education employees must be age 55 with 10 years or age 62 or immediately begin receiving a retirement benefit in order to enroll in a state health plan.	Yes
West Virginia	Those meeting minimum eligibility requirements for retirement of applicable state retirement system, and whose last employer prior to retirement was participant in state health plan. Must enroll within 2 months after retirement. Maximum state subsidy for retirees with 25 or more years of service or those retiring before 7/1/97. Retirees with 20 or more years service may defer enrollment in health plan for up to 2 years following separation, but will be required to pay 105% of premium upon reenrollment.	Yes

⁸ Rhode Island: If ineligible for Medicare with documented proof, state will pay an amount equal to the cost of the basic plan for under 65.

⁹ South Carolina: Enrollment required if Medicare-eligible. Retirees who are not Medicare-eligible may choose coverage in the Standard or Economy plans.

Table A2: Eligibility Requirements for Plan Participation, FY 2003

State	Eligibility Requirements	Medicare Enrollment Required¹
Wisconsin	State retirees participating in a health plan at the time of retirement and who receive an annuity within 30 days of retirement will be automatically enrolled for continued coverage. Insured employees who terminate service with 20 years of creditable service but who are not immediately eligible for a retirement annuity, or who defer their retirement annuity may enroll by submitting an application with 90 days of termination of state service.	Yes
Wyoming	Retirees who had medical coverage under the state employer’s plan for at least one year prior to retirement, and either: are at least age 50 on the retirement date, or have at least 20 years of service, or are eligible for state retirement benefits.	Yes

Table A3: State Government Retiree Monthly Health Insurance Premiums—Pre-Medicare, FY 2003

State	Total Premium ¹		Retiree Pays	
	Lowest-cost	Highest-cost	Lowest-cost	Highest-cost
Alabama ²	\$248.00		\$138.00	
Alaska ³	\$485.00		\$0	
Arizona ⁴	\$269.97	\$925.42	\$119.97	\$775.42
Arkansas	\$368.40	\$523.70	\$192.30	\$347.60
California ⁵	\$208.90	\$548.00	\$0	\$260.00
Colorado ⁶	\$373.00	\$699.00	\$143.00	\$469.00
Connecticut	N/A	N/A	\$0	\$20.60 ⁷
Delaware	\$293.62	\$332.12	\$0	\$38.50
Florida	\$290.82		\$140.82 ⁸	
Georgia	N/A	N/A	\$47.91	\$183.31
Hawaii ⁹	N/A	N/A	\$0	\$0
Idaho ¹⁰	\$332.72		\$332.72	
Illinois ¹¹	\$283.28	\$521.26	\$0	\$0

¹ Monthly premiums are for single coverage as of 1/1/03, except as noted. See Tables A5 and A7 for plan details. An “N/A” answer indicates that either the information was not available or not applicable to this state (e.g., there may be no stated total premium because the state plan is self-funded). A single entry for merged “highest-cost” and “lowest-cost” cells indicates that there is only one plan, which by default is both the “highest-cost” and “lowest-cost” plan.

² Alabama: Total premium is for 2002. Retiree share applies to both 2002 and 2003.

³ Alaska: 2003 rates; composite rate for all retirees. Retiree pays \$0 if retired prior to 7/1/86 or is at least age 65; \$450 if retired 7/1/86 or later and under age 60, or if retired 7/1/96 or later with less than 10 years service regardless of age.

⁴ Arizona: For Maricopa County. Retiree rates shown include \$150 subsidy for pre-Medicare retiree with 10 or more years service, \$100 subsidy for Medicare-eligible retiree with 10 or more years service. Additional state subsidy available for in-state retirees living in areas where no HMO is offered.

⁵ California: State employer subsidy of \$288/month.

⁶ Colorado: Rates vary by region; highest and lowest rates for Denver metro area (including statewide offerings) shown in table. Retiree rates include maximum subsidy of \$230/month for retirees with at least 20 years of service. Subsidy reduced by 5% for each year of service less than 20.

⁷ Connecticut: For those retiring 7/1/99 or later. State pays full cost for those retiring before 7/1/97, and pays full cost of most plans for those retiring between 7/1/97 and 7/1/99.

⁸ Florida: State subsidy of \$5/mo per year of service at retirement; minimum \$30, maximum \$150. Retiree rates shown assume maximum subsidy (retiree with 30 years service).

⁹ Hawaii: Under the newly created Employer-Union Health Benefits Trust Fund (effective 7/1/03), the state is projected to pay up to \$342/month for pre-Medicare and \$218/month for Medicare-eligible retirees with at least 25 years service at retirement or for those hired before 7/1/96 with at least 10 years of service at retirement; retirees pay any remaining amounts. Individuals hired 7/1/96 or later with 15-25 years of service at retirement will receive 75% of the subsidy, those retiring with 10-15 years service will receive 50% of the subsidy, and those retiring with less than 10 years service will receive no state subsidy.

¹⁰ Idaho: Retiree pays majority of premium. State contributes \$7 per active employee per month, and the active employee contributes an equal amount into a reserve fund that may be used to offset retiree premiums.

¹¹ Illinois: State pays 100% of premium for those retiring with at least 20 years creditable service.

Table A3: State Government Retiree Monthly Health Insurance Premiums—Pre-Medicare, FY 2003

State	Total Premium ¹		Retiree Pays	
	Lowest-cost	Highest-cost	Lowest-cost	Highest-cost
Indiana	\$315.76	\$486.27	\$315.76	\$486.27
Iowa	\$275.84	\$419.62	\$275.84	\$419.62
Kansas	\$317.82	\$369.64	\$317.82	\$369.64
Kentucky ¹²	\$211.04	\$467.76	\$0	\$198.32
Louisiana ¹³	\$724.58	\$737.18	\$123.12	\$142.00
Maine	\$456.20		\$0	
Maryland	N/A	N/A	\$31.58	\$65.12
Massachusetts	\$211.32	\$483.01	\$31.70	\$90.65
Michigan ¹⁴	\$287.21		\$14.36	
Minnesota	\$304.16		\$304.16	
Mississippi	\$252.00		\$252.00	
Missouri ¹⁵	\$434.00	\$625.00	\$174.00	\$365.00
Montana	\$308.00	\$335.00	\$308.00	\$335.00
Nebraska	\$257.97	\$294.98	\$257.97	\$294.98
Nevada ¹⁶	N/A	N/A	\$0	\$104.55
New Hampshire	\$540.16		\$0	
New Jersey ¹⁷	\$314.87	\$564.20	\$0	\$141.05
New Mexico ¹⁸	\$393.47	\$422.98	\$86.31	\$211.49
New York ¹⁹	\$338.38	\$464.23	\$33.84	\$159.69
North Carolina ²⁰	\$244.38		\$0	
North Dakota ²¹	\$285.25		\$195.25	

¹² Kentucky: Retirement system contribution varies by service, as follows: less than 4 years-0%, 4-9 years-25%, 10-14 years-50%, 15-19 years-75%; 20 years or more-100%; with a maximum 2003 contribution from \$269.44 to \$397.08, depending on county of residence. Rates in table reflect retiree receiving 100% contribution at \$269.44 maximum.

¹³ Louisiana: Rates shown apply to statewide PPO (low cost) and EPO (high cost). Other plans available in limited service areas have retiree rates ranging from \$98.88 (\$592.88 total premium) to \$238.82 (840.28 total premium).

¹⁴ Michigan: Rates are for State Health Plan for retirees hired before 4/1/97. State pays 3% per year of service for post-4/1/97 hires.

¹⁵ Missouri: Retiree rates reflect maximum state subsidy for individuals retiring 7/1/02 or later and residing in East Region (includes St. Louis metro area). Subsidy is 2.5% times years of credited service at retirement, to maximum of 75%, subject to appropriations. Current maximum is 60%. Percentage is applied to lowest-cost plan in region where retiree resides; retiree pays remainder. Individuals retiring before 7/1/02 receive greater of former subsidy and subsidy calculated under new formula.

¹⁶ Nevada: State subsidy for 2003 retirees will average \$263.89/month. Retiree rates show individual retiring before 1/1/94, or after 1/1/94 with 15 years of service. Subsidy based on years of service for those retiring 1/1/94 or later, with retirees with 15 years service receiving the average subsidy amount. Those retiring with 20 or more years of service receive maximum subsidy of 137.5% of base (average) amount.

¹⁷ New Jersey: Retiree rates shown are for retirees attaining 25 years of credited service between 7/1/00 and 6/30/03.

¹⁸ New Mexico: Retiree rates shown apply to those retiring before 7/1/01 or those retiring 7/1/01 or later with at least 20 years service. Subsidy for individuals retiring 7/1/01 or later depends on years of service at retirement, with maximum subsidy provided to those with 20 or more years.

¹⁹ New York: State pays no more than 90% of Empire Plan premium for employees retiring after 1/1/83.

²⁰ North Carolina: 2002 rates.

Table A3: State Government Retiree Monthly Health Insurance Premiums—Pre-Medicare, FY 2003

State	Total Premium ¹		Retiree Pays	
	Lowest-cost	Highest-cost	Lowest-cost	Highest-cost
Ohio	\$627.74	\$642.97	\$0	\$15.23
Oklahoma	\$328.50	\$414.14	\$223.50	\$309.00
Oregon ²²	\$353.71	\$553.18	\$175.72	\$375.19
Pennsylvania ²³	\$445.81		\$0	
Rhode Island ²⁴	\$249.50		\$0	
South Carolina	\$252.24	\$277.43	\$45.54	\$70.73
South Dakota	\$159.92	\$212.96	\$159.92	\$212.96
Tennessee ²⁵	\$343.45	\$369.10	\$68.69	\$73.82
Texas	\$238.54	\$306.61	\$0	\$0
Utah	\$250.60	\$269.47	\$5.01	\$18.87
Vermont	\$261.51	\$464.70	\$52.30	\$92.94
Virginia ²⁶	\$260.00	\$544.00	\$140.00	\$424.00
Washington	\$279.35	\$334.46	\$279.35	\$334.46
West Virginia ²⁷	\$300.00	\$312.75	\$158.00	\$253.00
Wisconsin	\$320.20	\$795.40	\$320.20	\$795.40
Wyoming	\$406.60		\$406.60	

²¹ North Dakota: Retiree rate reflects retiree with 20 years service receiving Retiree Health Insurance Credit of \$4.50 per year of service (\$90).

²² Oregon: Retiree rates reflect maximum state subsidy for pre-Medicare retirees with 30 years of service.

²³ Pennsylvania: State pays into Pennsylvania Employee Benefit Trust Fund. Rate shown is composite rate for pre-Medicare and Medicare-eligible retirees.

²⁴ Rhode Island: Rates in effect from 7/1/02 to 12/31/02. Rate reflects 100% subsidy for age 60 and 28 years of service.

²⁵ Tennessee: Retiree rates reflect maximum state subsidy for under age 65 retiree with 30 years of service.

²⁶ Virginia: Retiree rates reflect maximum commonwealth contribution of \$120/month (\$4/year of service to 30 years maximum years maximum).

²⁷ West Virginia: Retiree rates apply to retirees with at least 25 years service or those retiring before 7/1/97. Retiree premium assistance available to retirees with incomes below 250% of the federal poverty level.

Table A4: State Government Retiree Monthly Health Insurance Premiums—Medicare-Eligible, FY 2003

State	Total Premium ¹		Retiree Pays	
	Lowest-cost	Highest-cost	Lowest-cost	Highest-cost
Alabama ²	\$110.00		\$0	
Alaska ³	\$485.00		\$0	
Arizona ⁴	\$137.48	\$424.77	\$37.48	\$324.77
Arkansas	\$152.20	\$193.60	\$97.30	\$138.70
California ⁵	\$180.69	\$340.00	\$0	\$52.00
Colorado ⁶	\$127.00	\$227.00	\$12.00	\$112.00
Connecticut	N/A	N/A	\$0	\$12.41 ⁷
Delaware	\$223.35	\$332.12	\$0	\$38.50
Florida	\$154.67		\$4.67 ⁸	
Georgia	N/A	N/A	\$10.00	\$183.31
Hawaii ⁹	N/A	N/A	\$0	\$0
Idaho ¹⁰	\$157.90		\$157.90	

¹ Monthly premiums for single coverage as of 1/1/03, except as noted. See Tables A6 and A8 for plan details. An “N/A” answer indicates that either the information was not available or not applicable to this state (e.g., there may be no stated total premium because the state plan is self-funded). A single entry for merged “highest-cost” and “lowest-cost” cells indicates that there is only one plan, which by default is both the “highest-cost” and “lowest-cost” plan.

² Alabama: Total premium is for 2002. Retiree share applies to both 2002 and 2003.

³ Alaska: 2003 rates; composite rate for all retirees. Retiree pays \$0 if retired prior to 7/1/86 or is at least age 65; \$450 if retired 7/1/86 or later and under age 60, or if retired 7/1/96 or later with less than 10 years service regardless of age.

⁴ Arizona: For Maricopa County. Retiree rates shown include \$150 subsidy for pre-Medicare retiree with 10 or more years service, \$100 subsidy for Medicare-eligible retiree with 10 or more years service. Additional state subsidy available for in-state retirees living in areas where no HMO is offered.

⁵ California: State subsidy of \$288/month. If subsidy exceeds monthly premium, Medicare-eligible retiree will be reimbursed for excess up to amount of Medicare Part B premium.

⁶ Colorado: Rates vary by region; highest and lowest rates for Denver metro area (including statewide offerings) shown in table. Retiree rates include maximum subsidy of \$115/month for retirees with at least 20 years of service. Subsidy reduced by 5% for each year of service less than 20.

⁷ Connecticut: For those retiring 7/1/97 or later selecting Anthem Preferred. State pays full cost of all other health plans for Medicare-eligible retirees.

⁸ Florida: State subsidy of \$5/month per year of service at retirement; minimum \$30, maximum \$150. Retiree rates shown assume maximum subsidy (retiree with 30 years service). HMO rates vary by county from \$150.58 to \$187.05 (total premium).

⁹ Hawaii: Under the newly created Employer-Union Health Benefits Trust Fund (effective 7/1/03), the state is projected to pay up to \$342/month for pre-Medicare and \$218/month for Medicare-eligible retirees with at least 25 years service at retirement or for those hired before 7/1/96 with at least 10 years of service at retirement; retirees pay any remaining amounts. Individuals hired 7/1/96 or later with 15-25 years of service at retirement will receive 75% of the subsidy, those retiring with 10-15 years of service will receive 50% of the subsidy, and those retiring with less than 10 years of service will receive no state subsidy.

¹⁰ Idaho: Retiree pays majority of premium. State contributes \$7 per active employee per month, and the active employee contributes an equal amount into a reserve fund that may be used to offset retiree premiums.

Table A4: State Government Retiree Monthly Health Insurance Premiums—Medicare-Eligible, FY 2003

State	Total Premium ¹		Retiree Pays	
	Lowest-cost	Highest-cost	Lowest-cost	Highest-cost
Illinois ¹¹	\$179.68	\$249.50	\$0	\$0
Indiana	N/A	N/A	N/A	N/A
Iowa	\$150.22	\$448.52	\$150.22	\$448.52
Kansas	\$277.53	\$385.92	\$277.53	\$385.92
Kentucky ¹²	\$82.70	\$286.53	\$0	\$0
Louisiana ¹³	\$205.36	\$208.92	\$51.34	\$54.90
Maine	\$219.86		\$0	
Maryland	N/A	N/A	\$16.66	\$32.57
Massachusetts	\$176.87	\$325.42	\$26.53	\$55.74
Michigan ¹⁴	\$272.84		\$0	
Minnesota	\$194.51	\$376.39	\$194.51	\$376.39
Mississippi	\$164.00		\$164.00	
Missouri ¹⁵	\$232.00	\$285.00	\$93.00	\$146.00
Montana	\$177.00	\$209.00	\$177.00	\$209.00
Nebraska	N/A	N/A	N/A	N/A
Nevada ¹⁶	N/A	N/A	\$0	\$0
New Hampshire	\$308.21		\$0	
New Jersey ¹⁷	\$297.07	\$325.96	\$0	\$81.49
New Mexico ¹⁸	\$46.40	\$261.67	\$23.20	\$129.25
New York ¹⁹	\$338.38	\$464.23	\$33.84	\$159.69
North Carolina ²⁰	\$186.04		\$0	
North Dakota ²¹	\$173.45		\$83.45	

¹¹ Illinois: State pays 100% of premium for those retiring with at least 20 years creditable service.

¹² Kentucky: Retirement system contribution varies by service, as follows: less than 4 years-0%, 4-9 years-25%, 10-14 years-50%, 15-19 years-75%; 20 or more-100%.

¹³ Louisiana: Rates shown apply to statewide PPO (low cost) and EPO (high cost). Other plans available in limited service areas with retiree rates ranging from \$43.84 (\$175.36 total premium) to \$109.76 (\$263.78 total premium).

¹⁴ Michigan: Rates are for State Health Plan for retirees hired before 4/1/97. State pays 3% per year of service for post-4/1/97 hires.

¹⁵ Missouri: Retiree rates reflect maximum state subsidy for individuals retiring 7/1/02 or later and residing in East Region (includes St. Louis metro area). Subsidy is 2.5% times years of credited service at retirement, to maximum of 75%, subject to appropriations. Current maximum is 60%. Percentage is applied to lowest-cost plan in region where retiree resides; retiree pays remainder. Individuals retiring before 7/1/02 receive greater of former subsidy and subsidy calculated under new formula.

¹⁶ Nevada: State subsidy for 2003 retirees will average \$263.89/month. Retiree rates show individual retiring before 1/1/94, or after 1/1/94 with 15 years of service. Subsidy based on years of service for those retiring 1/1/94 or later, with retirees with 15 years service receiving the average subsidy amount. Those retiring with 20 or more years of service receive maximum subsidy of 137.5% of base (average) amount.

¹⁷ New Jersey: Retiree rates shown are for retirees attaining 25 years of credited service between 7/1/00 and 6/30/03.

¹⁸ New Mexico: Retiree rates shown apply to those retiring before 7/1/01 or those retiring 7/1/01 or later with at least 20 years service. Subsidy for individuals retiring 7/1/01 or later depends on years of service at retirement, with maximum subsidy provided to those with at 20 or more years.

¹⁹ New York: State pays no more than 90% of Empire Plan premium for employees retiring after 1/1/83.

²⁰ North Carolina: 2002 rates.

Table A4: State Government Retiree Monthly Health Insurance Premiums—Medicare-Eligible, FY 2003

State	Total Premium ¹		Retiree Pays	
	Lowest-cost	Highest-cost	Lowest-cost	Highest-cost
Ohio	\$273.22	\$273.22	\$0	\$0
Oklahoma	\$156.40	\$247.96	\$51.40	\$142.96
Oregon ²²	\$107.11	\$174.55	\$47.11	\$114.55
Pennsylvania ²³	\$445.81		\$0	
Rhode Island ²⁴	\$72.00	\$124.18	\$72.00	\$124.18
South Carolina	\$252.24	\$277.43	\$35.74	\$70.73
South Dakota	\$137.58		\$137.58	
Tennessee ²⁵	\$108.19	\$191.73	\$68.19	\$151.73
Texas	\$238.54	\$306.61	\$0	\$0
Utah	\$93.00	\$275.00	\$93.00	\$275.00
Vermont	\$187.63	\$198.68	\$37.53	\$39.74
Virginia ²⁶	\$236.00		\$116.00	
Washington	\$144.72	\$368.12	\$51.98	\$275.38
West Virginia ²⁷	\$339.00		\$52.00	
Wisconsin	\$257.10	\$360.00	\$257.10	\$360.00
Wyoming	\$255.72		\$255.72	

²¹ North Dakota: Retiree rate reflects retiree with 20 years service receiving Retiree Health Insurance Credit of \$4.50 per year of service (\$90).

²² Oregon: Retiree rates reflect \$60 subsidy through Retiree Health Insurance Account for Medicare-eligible retirees.

²³ Pennsylvania: State pays into Pennsylvania Employee Benefit Trust Fund. Rate shown is composite rate for pre-Medicare and Medicare-eligible retirees.

²⁴ Rhode Island: Rates in effect 7/1/02 through 12/31/02. Rate reflects 100% subsidy for age 65 and 28 years of service.

²⁵ Tennessee: Retiree rate for retiree with 30 or more years of service receiving the maximum state contribution.

²⁶ Virginia: Retiree rates reflect maximum commonwealth contribution of \$120/month (\$4/year of service to 30 years maximum).

²⁷ West Virginia: Rates apply to retirees with at least 25 years of service or those retiring before 7/1/97. Retiree premium assistance available to retirees with incomes below 250% of the federal poverty level.

Table A5: Other Characteristics of State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Alabama	SEHIP: In network	\$100/person; 3-member family maximum	100% inpatient, outpatient and physician services; 80% mental health, substance abuse, other	\$20	\$400/person; 3-member family maximum	Yes
	SEHIP: Out of network	\$100/person; 3-member family maximum	80% most services	N/A	\$400/person; 3-member family maximum	No
Alaska	State Retiree Health Plan	\$150/person; 3 per family	80% most medical and chemical dependency; 100% other	N/A	\$800/person	Yes
Arizona	Cigna HMO	N/A	N/A	\$10	N/A	Yes
	Pacificare PPO	\$500/person \$1,500/family	80% most services in-plan; 60% out-of-plan	\$15	\$4,000/person in-plan; \$8,000/person out-of-plan	Yes
Arkansas	QualChoice HMO	\$0	90%; \$250 copay inpatient hospital per admission	\$20 primary care	\$1,000/person \$1,500/family	Yes
	BCBS PPO	\$500/person \$1,000/family in-plan; \$750/person \$1,500 family out-of-plan	80% in-plan, 70% out-of-plan	N/A	\$2,000/person \$4,000/family in-plan; \$2,500/person \$5,000/family out-of-plan	Yes
California	Western Health Advantage	N/A	100% inpatient; \$10 copay outpatient	\$10	\$1,000/person \$2,500/family	Yes
	PERSCare	\$500/person \$1,000/family	90% most services in PPO; 60% non-PPO	\$20	\$2,000/person \$4,000/family	Yes
Colorado	Kaiser Permanente HMO #3	N/A	\$1,000 copay per hospital admission; then 100%	\$25	\$3,000/person \$6,000/family	Yes
	Rocky Mountain HMO #1	N/A	\$300 hospital copay per admission; then 100%	\$10	\$1,000/person \$3,000/family	Yes

Note: For monthly premiums for the plans shown in this table see Table A3. An “N/A” answer indicates that either the information was not available and/or not applicable to the plan shown.

Table A5: Other Characteristics of State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Connecticut	POS in-plan, POE ¹	N/A	100% hospital coverage	\$ 5 ²	N/A	Yes
	POS out-of-plan	\$300/person \$900/family	80% coinsurance	20%	\$2,000/person \$4,000/family	Yes
Delaware	BCBS Basic	\$400/person \$800/family	100% hospital coverage; 80% physician inpatient coverage	N/A	\$1,000/person \$2,000/family	No
	BCBS Comprehensive	\$200/person \$500/family	100% most services	20%	N/A	Yes
Florida	State PPO	\$150 in-plan, \$300 out-of- plan	90% in-plan, 70% out-of- plan most services. \$100 hospital copay in-plan, \$300 out-of-plan.	\$10 + 10% in- plan; \$20 + 30% out-of- plan	\$2,500/person \$5,000/family	Yes
Georgia	Blue Choice HMO	N/A	100% most services; \$200 hospital admission copay	\$15	N/A	Yes
	Indemnity	\$300/person \$900/family	90% most services; \$100 hospital admission deductible	10%	\$2,000/person \$4,000/family	Yes
Hawaii ³						
Idaho	State plan	\$400/person \$1,200/family	80% most services	20%	\$4,800/person \$9,600/family	Yes
Illinois	HMO	N/A	\$150 hospital copay, then 100%	\$10	N/A	Yes
	Indemnity	\$200/person \$300/family	90% hospital services in- plan; \$200 per admission deductible for out-of-plan hospitals	10% in- plan; 20% U&C other	\$800/person, \$2,000/family in-plan; \$3,000/person, \$7,000/family out-of-plan	Yes

¹ Connecticut: In POE or Point of Enrollment plan, services are available from defined network of providers only.

² Connecticut: POS in-plan office visit copay is \$10 for those retiring 7/1/99 or later.

³ Hawaii: The state of Hawaii has created an Employer-Union Health Benefits Trust Fund, effective July 1, 2003. The Fund will offer multiple options for pre-Medicare and Medicare-eligible retirees. Details have not been finalized at this time.

Table A5: Other Characteristics of State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Indiana	Anthem Traditional	Varies by salary ⁴	Most services covered at 80% in-plan, 60% out-of-plan	20% in-plan, 40% out-of-plan	\$1,000/person \$2,400/family	Yes
	Humana HMO	\$0	Most services covered at 100%	\$5	\$1,000/person \$2,000/family	Yes
Iowa	Blue Advantage	N/A	Authorized hospital services covered at 100%. Primary care physician referral required	\$10	\$750/person \$1,500/family	Yes
	Wellmark Program 3 Plus	\$300/person \$400/family	80% covered charges	20%	\$600/person \$800/family	Yes
Kansas ⁵	Premier Blue HMO	\$200/person \$400/family; inpatient services only	100% inpatient services	\$10	N/A	Yes
	Preferred Health Systems PPO	\$200/person \$400/family	90% in-plan, 70% out-of-plan	\$15	\$1,000/person \$2,000/family in-plan; \$3,000/person, \$6,000/family out-of-plan	Yes
Kentucky	CHA Health EPO	N/A	\$1,500 per admission hospital copay, then 100%	\$25	\$4,000/person \$8,000/family	Yes
	Humana POS-A	\$0 in-plan; \$500/person, \$1,000/family out-of-plan	\$100 hospital copay per admission, then 100% in-plan, 60% out-of-plan	\$10 in-plan; 40% out-of-plan	\$1,000/person \$2,000/family in-plan; \$2,500/person \$5,000/family out-of-plan	Yes

⁴ Indiana: \$0 deductible for annual salary less than \$25,000; \$125/person or \$400/family for salaries \$25,000-\$35,000; \$500/person or \$1,000/family for salaries over \$35,000.

⁵ Kansas: All Kansas plans include dental.

Table A5: Other Characteristics of State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Louisiana	PPO	\$300/person \$900/family	Plan pays 90% PPO services (or non-PPO out-of-state); 70% non-PPO	N/A	\$10,000/person	Yes
	EPO	\$0 (\$300/person or \$900/family)	\$100/day hospital copay (\$300 maximum); then 100% hospital and other services in-plan	\$15	N/A in-plan	Yes
Maine	Anthem HMO	N/A	Plan provides hospitalization plus major medical	\$10	\$2,000/person \$4,000/family	Yes
Maryland ⁶	Kaiser Permanente HMO	N/A	100% in-plan coverage; 0% out-of-plan	\$5	N/A	No
	MLH-Eagle PPO	\$0 in-plan; \$250/person or \$500/family out-of-plan	100% coverage in-plan; 80% out-of-plan	\$15	N/A in-plan; \$3,000/person \$6,000/family out-of-plan	No
Massachusetts	Fallon Community Health Plan HMO	N/A	N/A	\$15	N/A	Yes
	GIC (state) indemnity comprehensive	\$75/person \$150/family	100% coverage most services; \$150/quarter hospital deductible	\$10	N/A	Yes
Michigan	State PPO	\$200/person or \$400/family in-plan; \$500/person or \$1,000/family out-of-plan	100% most services in-plan; 90% out-of-plan	\$10	\$1,000/person \$2,000/family in-plan; \$2,000/person \$4,000/family out-of-plan	Yes
Minnesota	State Health Plan ⁷	\$100/person cost level 1; \$150/person cost level 2; \$300/person cost level 3; 2- person family maximum	100% hospital services. Per admission copays: \$200 for cost level 2 and \$400 for cost level 3. Other services covered at 100% cost level 1, 95% cost level 2, 90% cost level 3	\$5/\$10/\$20	\$500/person \$1,000/family	Yes

⁶ Maryland: Separate prescription drug plan available at \$32.07/month.

⁷ Minnesota: Primary Care Clinics assigned to one of three cost levels; copays for some services vary by cost level.

Table A5: Other Characteristics of State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Mississippi	State Health Plan	\$450/person or \$900/family in-plan; \$900/person \$1,800/family out-of-plan	Most services covered at 80% in-plan; 60% out-of-plan	N/A	\$2,000/person in-plan, \$3,000/person out-of-plan	Yes
Missouri	Mercy HMO standard	N/A	\$400 hospital per admission copay, then 100%	\$30	N/A	Yes
	Copay plan	\$500/person \$1,000/family	\$200 hospital per admission copay, then 100% in-plan; 30% coinsurance out-of-plan	\$25	N/A	Yes
Montana	Basic indemnity	\$1,305/person \$2,610/family	80% preferred hospital coinsurance, 65% nonpreferred hospital coinsurance; 75% most other services	\$15	\$2,500/person \$5,000/family	Yes
	Blue Choice HMO	\$300/person \$600/family	75% coinsurance most services	\$15	\$2,000/person \$4,000/family	Yes
Nebraska	BlueChoice Advantage POS	\$0 in-plan; \$500/person \$1,000/family out-of-plan	80% hospital charges covered in-plan, 60% out-of-plan	\$10 in-plan; 40% out-of-plan	\$1,500/person \$3,000/family in-plan; \$3,000/person \$6,000/family out-of-plan	Yes
	Blue Preferred PPO	\$400/person \$800/family in-plan; \$600/person \$1,200/family out-of-plan	80% hospital charges covered in-plan, 70% out-of-plan	20% in-plan; 30% out-of-plan	\$1,400/person \$2,800/family in-plan; \$4,000/person \$6,400/family out-of-plan	Yes
Nevada	HMO	N/A	\$200 hospital copay, then 100%	\$15	\$1,200/person \$2,700/family	Yes
	PPO	\$250/person \$500/family	80% most services in-plan, 50% out-of-plan	\$15 in-plan; 50% out-of-plan	\$2,400/person \$4,800/family in-plan; \$8,500/person \$17,000/family out-of-plan	Yes
New Hampshire	Anthem POS	N/A	100% most services in-plan; 80% out-of-plan	\$10	N/A	Yes

Table A5: Other Characteristics of State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
New Jersey	Oxford HMO	N/A	100% most services after copays	\$5	N/A	Yes
	Traditional	\$100/person, 2-person maximum	80% most services	20%	\$400/person	Yes
New Mexico	HMO	N/A	100% hospital charges after \$250 admission copay	\$20	\$2,000/person \$6,000/family	Yes
	BCBS Triple Option POS	\$0 for primary coordinated care; otherwise \$200/person, \$400/2-party, \$600/family in-plan and \$300/person, \$600/2-party or \$900/family out-of-plan	Most services 100% after copay (\$250 hospital admission copay) if through primary coordinated care. For self-coordinated care, plan pays 80% most services in-plan, 30% out-of-plan.	\$20 for primary coordinated care; or 20% in-plan, 30% out-of-plan	\$2,000/person, \$6,000/family in-plan; \$3,500/person, \$10,500/family out-of-plan	Yes
New York	Empire Plan	\$283/enrollee	Basic hospital services covered at 100%	\$12	\$1,362/family	Yes
	HMO Blue (160)	N/A	100% most services	\$10	N/A	Yes
North Carolina	State plan	\$350/person \$1,050/family	Plan pays 80%. \$100 inpatient copay	\$15	\$1,500/person \$4,500/family	Yes
North Dakota	PPO basic	\$250/person \$750/family	Plan pays 80% most services	\$25	\$1,250/person \$2,500/family	Yes
Ohio	PERS Health Care Plan	\$100/person \$200/family in-plan; \$150/person \$300/family out-of-plan	Plan pays 80% most services in-plan, 70% UCR out-of-plan	\$10 in-plan; 70% UCR out-of-plan	\$500/person \$750/family in-plan; \$750/person \$1,125/family out-of-plan	Yes
Oklahoma	Health Choice indemnity-low	\$1,500/person \$4,500/family	Plan pays 80% most charges in-plan, 75% out-of-plan	\$20 in-plan; 25% out-of-plan	\$3,500/person in-plan; \$4,000/person out-of-plan	Yes
	PacifiCare HMO-high	N/A	\$50 hospital admission copay, then 100%	\$10	N/A	Yes

Table A5: Other Characteristics of State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Oregon	Kaiser Permanente HMO	N/A	\$200 per admission hospital copay, then 100%	\$15	\$1,000/person \$2,000/family	Yes
	Clear Choice PPO	\$200/person \$600/family	80% most services in-plan, 70% out-of-plan	\$15 in-plan; 30% out-of-plan	N/A	Yes
Pennsylvania	HMO	\$0	100% for most services	\$15	N/A	Yes
	Basic Option	\$200/person, 3 deductible per family maximum for major medical	Major medical covers 80% of first \$1,900 covered charges, then 100%	20% to major medical maximum	\$380/person	Yes
Rhode Island	Blue Cross PPO	\$100/person \$200/family	100% most services in-plan; 80% for prescription drugs	N/A	N/A	Yes
South Carolina	Companion HMO	\$0	\$250 per hospital admission; then 90% coverage	\$15	\$1,500/person \$3,000/family	Yes
	Cigna POS	N/A	N/A	N/A	N/A	
South Dakota	State plan – low option	\$1,000/person \$2,500/family of 3 or more	Plan pays 75% covered charges in-plan, 65% out-of-plan	N/A	\$3,500/person in-plan; \$5,000/person out-of-plan	Yes
	State plan – high option	\$500/person \$1,200/family or 3 or more	Plan pays 75% covered charges in-plan, 65% out-of-plan	N/A	\$3,000 in-plan; \$5,000 out-of-plan	Yes
Tennessee	HMOs	N/A	\$100 per admission hospital copay, then 100%	\$10	N/A	Yes
	BCBS PPO	\$250/person \$625/family	Most services covered at 90% in-plan, 70% out-of-plan	10% in-plan; 30% out-of-plan	\$1,250/person in-plan; \$2,500/family in-plan; \$3,750/person \$7,500/family out-of-plan	Yes
Texas	HMOs	N/A	Inpatient services covered at 100%	\$10	N/A	Yes
	HealthSelect PPO	\$0 in-plan; \$500/person \$1,500/family out-of-plan	Inpatient services covered at 90% in-plan, 70% out-of-plan	\$15 in-plan; \$30 out-of-plan	\$500/person in-plan; \$1,500 out-of-plan	Yes

Table A5: Other Characteristics of State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ► Lowest-cost ► Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Utah	PEHP Exclusive HMO	N/A	Plan pays 100%	\$15	\$1,500/person \$3,000/family	Yes
	PEHP Preferred PPO	N/A	Plans pays 90% of benefits schedule amount	\$20	\$1,500/person \$3,000/family	Yes
Vermont	SafetyNet catastrophic	\$2,000/person; no family maximum	Plan pays 70% most services	30%	\$6,000/person; no family maximum	No
	TotalChoice indemnity	\$300/person \$600/family	Plan pays 90% inpatient hospital services; 80% most other services	20%	\$750/person \$2,250/family	Yes
Virginia	Kaiser Permanente HMO	N/A	100% covered	\$5	N/A	Yes
	Cost Alliance	N/A	\$100/day hospital copay to \$500 maximum per admission	\$20	\$2,500 per covered person	Yes
Washington	Kaiser Permanente HMO	N/A	\$200/day copay for inpatient hospital services to \$600/person annual maximum, then 100%	\$10	\$750/person \$1,500/family	Yes
	Premiera Blue Cross Foundation	N/A	100% hospital services after inpatient hospital copayment	\$10	\$750/person \$1,500/family	Yes
West Virginia	State PPO	\$375/person; \$750/family	Plan pays 80% in-plan, 60% out-of-plan	\$10	\$1,500 in-plan; \$3,000 out-of-plan	Yes
	Health Plan HMO A	\$0	100% for most services	\$10	\$2,000/person	Yes
Wisconsin	Mercycare HMO	N/A	100% coverage inpatient services	\$0	N/A	Yes
	Standard	\$25/person, 2 per family maximum (for major medical only)	Hospital and most other services covered at 100%	\$0	N/A	Yes
Wyoming	PPO Option II	\$750/person \$1,000/family	In-plan hospital and physicians services covered at 85%; out-of-plan 80%	15% in-plan; 20% out-of-plan	\$10,000/person \$20,000/family	Yes

Table A6: Other Characteristics of State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Alabama	SEHIP: In network	\$100/person; 3-member family maximum	100% inpatient, outpatient and physician services; 80% mental health, substance abuse, other	\$20	\$400/person; 3-member family maximum	Yes
	SEHIP: Out of network	\$100/person; 3 member family maximum	80% most services	N/A	\$400/person; 3-member family maximum	No
Alaska	State Retiree Health Plan	\$150/person; 3 per family	80% most medical and chemical dependency; 100% other	N/A	\$800/person	Yes
Arizona	Medicare + Choice HMO	N/A	N/A	\$10	N/A	Yes
	Cigna PPO	\$0 in-plan, \$300/person \$600/family out-of-plan	100% most services in-plan, 70% out-of-plan	\$10 in-plan, 30% out-of-plan	\$1,000/person \$2,000/family in-plan; \$3,000/person \$6,000/family out-of-plan	Yes
Arkansas	QualChoice HMO	\$0	90% hospital, \$250 copay inpatient hospital per admission	\$20 primary care	\$1,000/person \$1,500/family	Yes
	BCBS PPO	\$500/person \$1,000 family in-plan; \$750/person \$1,500/family out-of-plan	20% in-plan, 30% out-of-plan	N/A	\$2,000/person \$4,000/family in-plan; \$2,500/person \$5,000/family out-of-plan	Yes
California	Western Health Advantage	N/A	Hospital inpatient services covered in full. \$10 copay outpatient services	\$10	N/A	Yes
	PERSCare	N/A	Pays Medicare Part A and B. 100% hospital inpatient and outpatient services	\$0	N/A	Yes

Table A6: Other Characteristics of State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Colorado	Kaiser Permanente	N/A	\$300 copay per hospital admission, then 100%	\$15	\$2,500/person	Yes
	Mutual of Omaha	\$500 if no Medicare Part A coverage	100% hospital charges. 70% hospital coinsurance for individuals with no Medicare Part A coverage	N/A	\$1,000 if Medicare Part A & B; \$1,500 if only Part B coverage	Yes
Connecticut	POS in-plan, POE	N/A	100% inpatient services	\$5 ¹	N/A	Yes
	POS out-of-plan	\$300/person \$900 family	80% coinsurance	20%	\$2,000/person \$4,000/family	Yes
Delaware	BlueCare Carveout	Yes	100% coverage in-plan	N/A	N/A	Yes
	BCBS Comprehen-sive	\$200/person \$500/family	100% hospital coverage. Traditional indemnity covering hospital, preventive, and extended services	N/A	N/A	Yes
Florida	State PPO	\$150 in-plan, \$300 out-of- plan	90% in-plan, 70% out-of- plan most services. \$100 hospital copay in-plan, \$300 out-of-plan	\$10 + 10% in-plan; \$20 + 30% out- of-plan	\$2,500/person \$5,000/family	Yes
Georgia	Kaiser Permanente Medicare + Choice HMO	N/A	100% most services; \$200 hospital admission copay	\$15	\$1,500/person \$4,500/family	Yes
	Indemnity	\$300/person \$900/family	90% most services; \$100 hospital admission deductible	10%	\$2,000/person \$4,000/family	Yes
Hawaii ²						
Idaho	State plan	\$400/person \$1,200/family	80% most services	20%	\$4,800/person \$9,600/family	Yes

¹ Connecticut: POS in-plan office visit copay is \$10 for those retiring 7/1/99 or later.

² Hawaii: The state of Hawaii has created an Employer-Union Health Benefits Trust Fund, effective 7/1/03. The Fund will offer multiple options for pre-Medicare and Medicare-eligible retirees. Details have not been finalized at this time.

Table A6: Other Characteristics of State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Illinois	Indemnity	\$200/person \$300/family	90% in-plan hospital services; \$200 per admission deductible for non-plan hospitals	10% in-plan; 20% U&C other	\$800/person, \$2,000/family in-plan; \$3,000/person, \$7,000/family out-of-plan	Yes
Indiana	No coverage in state health plan past age 65					
Iowa	Blue Advantage	N/A	100% authorized hospital services. Primary care physician referral required	\$10	\$750/person \$1,500/family	Yes
	John Deere Open Access	N/A	100% authorized hospital services	\$10	\$750/person \$1,500/family	Yes
Kansas ³	Kansas Senior Plan C	N/A	Retiree pays excess of Medicare-approved Part B charges	N/A	N/A	Yes
	Preferred Health Systems PPO	\$200/person \$400/family	90% in-plan, 70% out-of-plan	\$15	\$1,000/person \$2,000/family in-plan; \$3,000/person, \$6,000/family out-of-plan	Yes
Kentucky	Bankers Life Medicare Supplement	N/A	N/A	N/A	N/A	N/A
	Anthem Blue Senior	N/A	N/A	N/A	N/A	N/A
Louisiana	PPO	\$300/person \$900/family	Plan pays 80% after Medicare reduction	N/A	\$10,000 per person	Yes
	EPO	\$0 (\$300/person or \$900/family)	\$100/day hospital copay (\$300 maximum); then 100% hospital and other services in-plan	\$15	N/A in-plan	Yes
Maine	Anthem companion	\$100/person \$200/family	Plan pays 80% for most services	\$0	N/A	Yes

³ Kansas: All Kansas plans include dental.

Table A6: Other Characteristics of State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Maryland ⁴	Blue Choice HMO	N/A	100% in-plan coverage. 0% out-of-plan	\$5	N/A	No
	MLH-Eagle PPO	\$0 in-plan; \$250/person or \$500/family out-of-plan	100% coverage in-plan; 80% out-of-plan	\$15	N/A in-plan; \$3,000/person or \$6,000/family out-of-plan	No
Massachusetts	Fallon Senior Plan Preferred HMO	N/A	100% most services	\$5	N/A	Yes
	GIC (state) indemnity Medicare extension (comprehensive)	N/A	100% coverage inpatient services after \$50/quarter deductible	100% after \$35 deductible; \$5 copay preventive	N/A	Yes
Michigan	State PPO	\$200/person or \$400/family in-plan; \$500/person or \$1,000/family out-of-plan	100% most services in-plan, 90% out-of-plan	\$10	\$1,000/person or \$2,000/family in-plan; \$2,000/person or \$4,000/family out-of-plan	Yes
Minnesota	State Health Plan ⁵	\$100/person cost level 1; \$150/person cost level 2; \$300/person cost level 3; 2- person family maximum	100% hospital services. Per admission copays \$200 for cost level 2 and \$400 for cost level 3. Other services covered at 100% for cost level 1, 95% for cost level 2, and 90% for cost level 3	\$5, \$10, or \$20 depending on cost level	\$500/person \$1,000/family	Yes
Mississippi	State Health Plan	\$450/person \$900/family in-plan; \$900/person \$1,800/family out-of-plan	Most services covered at 80% in-plan, 60% out-of- plan	N/A	\$2,000/person in-plan, \$3,000/person out-of-plan	Yes

⁴ Maryland: Separate prescription drug plan available at \$32.07/month.

⁵ Minnesota: Primary care clinics assigned to one of three cost levels; copays for some services vary by cost level.

Table A6: Other Characteristics of State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Missouri	Mercy HMO standard	N/A	\$400 hospital per admission copay, then 100%	\$30	N/A	Yes
	Copay plan	\$500/person \$1,000/family	\$200 hospital per admission copay, then 100% coverage in-plan; 70% coinsurance out-of-plan	\$25	N/A	Yes
Montana	Traditional/Medicare Coordinated	\$435/person \$1,305/family	80% preferred hospital coinsurance, 65% nonpreferred hospital coinsurance; 75% most other services	25%	\$1,500/person \$3,000/family	Yes
	Blue Choice HMO	\$300/person \$600/family	75% coinsurance most services	\$15	\$2,000/person \$4,000/family	Yes
Nebraska	No coverage in state health plan past age 65					
Nevada	HMO	N/A	\$200 hospital copay, then 100%	\$15	\$1,200/person \$2,700/family	Yes
	PPO	\$250/person \$500/family	80% most services in-plan, 50% out-of-plan	\$15 in-plan; 50% out-of-plan	\$2,400/person \$4,800/family in-plan; \$8,500/person \$17,000/family out-of-plan	Yes
New Hampshire	Medicare supplement	N/A	N/A	N/A	N/A	Yes
New Jersey	Oxford HMO	N/A	100% most services after copays	\$5	N/A	Yes
	Traditional	\$100/person, 2-person maximum	80% most services	20%	\$400/person	Yes
New Mexico	St. Joseph Medicare Plus Silver HMO	N/A	\$100/year hospital copay, then 100%	\$10	N/A	Yes
	BCBS Carveout Plus	\$0; or \$100 for non-Medicare providers/services	100% coverage for Medicare providers/services; 80% for services not covered by Medicare but covered by plan	\$0; or 20% for non-Medicare providers	\$500/person	Yes
New York	Empire Plan	\$283/enrollee	Basic hospital services covered at 100%	\$12	\$1,362/family	Yes
	HMO Blue (160)	N/A	100% most services	\$10	N/A	Yes

Table A6: Other Characteristics of State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
North Carolina	State plan	\$350/person \$1,050/family	Plan pays 80%. \$100 inpatient copay	\$15	\$1,500/person \$4,500/family	Yes
North Dakota	PPO	\$250/person \$750/family	Plan pays 85% in-plan, 80% out-of-plan for balance of Medicare-covered charges	N/A	\$1,000/person \$2,250/family in-plan; \$1,500/person \$3,250/family out-of-plan	Yes
Ohio	PERS Health Plan	\$100/person \$200/family	Most services covered at 80%	20%	\$500/person \$750/family	Yes
Oklahoma	All Medicare supplements	\$0	Plan pays 100% Medicare-eligible expenses	Member pays Part B deductible	N/A	Yes
Oregon	Kaiser PermanenteHMO	N/A	\$200 per admission hospital copay, then 100% hospital coverage	\$15	N/A	Yes
	ODS	\$100/person	Plan pays 20% of the Medicare allowable amount	80%	N/A	Yes
Pennsylvania	Medicare supplement + Major medical	N/A	Supplement pays excess of most Medicare covered charges; major medical pays additional medically necessary charges and Part B deductible	N/A	N/A	Yes
Rhode Island	Blue Chip Medigap	N/A	Medicare supplement	N/A	N/A	
	Blue Cross Plan 65 indemnity	Yes	80% covered charges	N/A	N/A	
South Carolina	State Plan-standard	\$250/person \$500/family	80% most services	N/A	\$1,500/person \$3,000/family	Yes
South Dakota	Medicare supplement	Medicare Part A & B deductibles	Medicare Plan "F" supplement; pays Part A and B coinsurance	N/A	N/A	No
Tennessee	Tennessee Plan 1	Medicare Part A deductible	Medicare Plan "D" supplement; pays Part A and B coinsurance	N/A	N/A	No
	Tennessee Plan 3 PPO	\$250 single	Plan pays 90% maximum allowable charges in-plan, 70% out-of-plan	10% in-plan; 30% out-of-plan	\$1,250 single in-plan; \$3,750 single out-of-plan	Yes

Table A6: Other Characteristics of State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
Texas	HMOs	N/A	100% inpatient services	\$10	N/A	Yes
	HealthSelect PPO	\$0 in-plan; \$500/person \$1,500/family out-of-plan	Inpatient services covered at 90% in-plan, 70% out- of-plan	\$15 in-plan; 30\$ out-of- plan	\$500/person in-plan; \$1,500/person out-of-plan	Yes
Utah	Low option	N/A	Medicare Part A charges covered in full. Plan pays 20% of Part B deductible and 20% of most approved charges thereafter	N/A	N/A	No ⁶
	High option	N/A	Medicare Part A charges covered in full. Plan pays 20% of Part B deductible and 20% of most approved charges thereafter	N/A	N/A	Yes
Vermont	HealthGuard PPO	\$300/person \$600/family in-plan; \$500/person \$1,000/family out-of-plan	Plan pays 80% in-plan, 60% out-of-plan most services	20% in-plan; 40% out-of- plan	\$2,000/person \$6,000/family in-plan; \$4,000/person \$6,000/family out-of-plan	Yes
	TotalChoice indemnity	\$300/person \$600/family	90% inpatient hospital; 80% most other services	20%	\$750/person \$2,250/family	Yes
Virginia	Advantage 65	\$100 of Medicare Part A deductible; All of Part B deductible	Pays Medicare Part A deductible except \$100; pays Part A and B coinsurance	N/A	N/A	Yes
Washington	Medicare supplement	\$100 (Medicare Part B deductible)	Medicare Plan E supplement pays Part A deductible and balance of coinsurance; also pays 20% of Part B approved medical expenses	N/A	N/A	No
	Premiera Blue Cross Foundation	N/A	100% inpatient coverage after inpatient hospital copay	\$10	\$750/person \$1,500/family	Yes

⁶ Utah: Discount available if using prescription drug card.

Table A6: Other Characteristics of State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Deductibles	Coinsurance Paid By Plan Copays Paid by Patient	Office Visit Copay	Out-of-Pocket Maximum	Rx
West Virginia	Medicare supplement	\$150/person \$300/family	Plan generally pays balance of Medicare-approved amount not covered by Medicare	N/A	\$1,000/person	Yes
Wisconsin	Mercycare HMO	N/A	100% inpatient services	\$0	N/A	Yes
	Medicare Plus \$100,000	\$0	100% coverage for physician and hospital services. Provides reimbursement for all Medicare deductibles for covered services. Plan provides maximum \$100,000 per injury or illness in addition to Medicare payments	N/A	N/A	Yes
Wyoming	PPO Option II	\$750/person \$1,000/family	85% hospital and physicians services in-plan; 80% out-of-plan	15% in-plan; 20% out-of-plan	\$10,000/person \$20,000/family	Yes

Table A7: Characteristics of Prescription Drug Coverage in State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Patient Copayments	
		At Pharmacy	Mail Order
Alabama	SEHIP	\$5 generic, \$15 preferred brand (\$20 for maintenance drugs), \$35 other brands. 60 day supply of maintenance drugs \$50/person deductible	N/A
Alaska	State Retiree Health Plan	Generic: \$5 for 30 day supply, \$10 for 31-90 days Brand: \$10 for 30 days, \$20 for 31-90 days	Generic: \$0 Brand: \$2
Arizona	Cigna HMO	\$10 generic, \$20 brand, \$40 non preferred brand; 30 day supply	N/A
	Pacificare PPO	\$10 generic, \$20 brand	\$20 generic, \$45 brand; 90 day supply
Arkansas	QualChoice HMO, BCBS PPO	\$10 generic, \$25 brand, \$50 nonformulary brand; 34 day supply	\$20 generic, \$50 brand, \$100 nonformulary brand; 90 day supply
California	Western Health, PERSCare	\$5 generic, \$15 brand, \$30 nonformulary; 30 day supply	\$10 generic, \$25 brand, \$45 nonformulary brand; 90 day supply
Colorado	Kaiser Permanente HMO #3	50% copay to \$30 for 60 day supply	50% copay to \$30 for 60 day supply
	Rocky Mountain HMO #1	\$10 generic, \$20 preferred brand, \$40 nonpreferred brand; 31 day supply	\$20 generic, \$40 preferred brand, \$80 nonpreferred brand; 90 day supply
Connecticut	POS in-plan, POE	\$3 generic, \$6 brand; 34 day supply, or 90 days for maintenance drugs	\$3 generic, \$6 brand; 90 day supply
	POS out-of-plan	80% coinsurance	No mail order
Delaware	BCBS Comprehensive	\$5 minimum copay; multisource brands covered at 30%; single source brands covered at 20%.	No mail order
Florida	State PPO	\$7 generic, \$20 preferred brand, \$35 nonpreferred; 30 day supply	\$10.50 generic, \$30 preferred brand, \$52.50 nonpreferred; 90 day supply
Georgia	Blue Choice HMO	\$10 generic, \$20 preferred brand, \$35 nonpreferred brand	90 day supply covered in full after 2 copays: \$10 generic, \$20 preferred brand, \$35 nonpreferred brand
	Indemnity	\$10 generic, \$20 preferred brand, 20% coinsurance for nonpreferred brand with \$35 minimum, \$75 maximum. Monthly maximum \$100/person, \$200/family for generic and preferred brand	N/A

Note: The prescription drug benefits shown in this table are part of the health care plans detailed in Table A5. An “N/A” answer indicates that either the information was not available and/or not applicable to the plan shown.

Table A7: Characteristics of Prescription Drug Coverage in State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Patient Copayments	
		At Pharmacy	Mail Order
Hawaii ¹			
Idaho	State Plan	\$12 generic, \$18 brand if generic not available, \$40 brand if generic is available; 34 day supply, or 90 day supply of maintenance drugs, subject to 2 copays. \$10 copay for diabetic supplies. \$25 copay + 20% from non-network pharmacy	No mail order
Illinois	Indemnity	\$7 generic, \$14 formulary brand, \$28 non-formulary brand; 30 day supply	\$14 generic, \$28 formulary brand, \$56 nonformulary brand; 90 day supply
Indiana	Anthem Traditional	\$25 deductible, then 10% generic, 20% brand in-plan; 30% generic, 40% brand out-of-plan; 34 day supply.	Deductible applies. 10% generic, 20% brand in-plan; 30% generic, 40% brand out-of-plan; 90 day supply
	Humana HMO	\$5 generic, \$10 brand, \$15 nonformulary	N/A
Iowa	Managed care options	\$5 preferred generic, \$15 preferred brand, greater of \$30 or 25% for nonpreferred brand or nonpreferred generic	\$10 generic, \$30 preferred brand, \$60 nonpreferred brand or nonpreferred generic; 90 day supply
	Indemnity plans	\$5 preferred generic, \$15 preferred brand, \$30 nonpreferred brand or nonpreferred generic. Separate \$250/person, \$500/family out-of-pocket maximum	No mail order
Kansas	Premier Blue HMO, Preferred Health Systems PPO	Member pays 20% generic, 30% preferred brand, 50% nonpreferred brand; 30 day supply. \$70 special case drugs. \$2,400/person maximum; excludes nonpreferred brand	Available at lower cost
Kentucky	CHA EPO	\$25 generic, \$35 brand, \$50 nonformulary; 30 day supply	\$50 generic, \$70 brand, \$100 nonformulary; 90 day supply of maintenance drugs only
	Humana POS—A	\$10 generic, \$15 brand, \$30 nonformulary; 30 day supply in-plan; Member pays 40% out-of-plan	\$20 generic, \$30 brand, \$60 nonformulary; 90 day supply of maintenance drugs only
Louisiana	POS, EPO	50% at network pharmacies, \$40/prescription maximum, to \$1,000/person annual maximum. Thereafter, \$0 copay generic, \$15 brand. Nonnetwork: reimbursement to 50% of network rat.	No mail order
Maine	Anthem HMO	\$10 generic, \$20 name brand	N/A
Maryland	Prescription drugs not included in health plan		

¹ Hawaii: The state of Hawaii has created an Employer-Union Health Benefits Trust Fund, effective 7/1/03. The Fund will offer multiple options for pre-Medicare and Medicare-eligible retirees. Details have not been finalized at this time.

Table A7: Characteristics of Prescription Drug Coverage in State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Patient Copayments	
		At Pharmacy	Mail Order
Massachusetts	Fallon Community Health Plan HMO	\$5 tier I, \$15 tier II, \$35 tier III; 30 day supply	\$9 tier I, \$39 tier II, \$99 tier III; 90 day supply maintenance drugs
	State indemnity	\$7 generic, \$20 preferred brand, \$40 nonpreferred brand; 30 day supply; no out of network coverage	\$14 generic, \$40 preferred brand, \$70 nonpreferred brand; 90 day supply of maintenance drugs
Michigan	State PPO	\$7 generic, \$12 brand	\$5 generic, \$10 brand; 90 day supply, maintenance drugs
Minnesota	State Health Plan	\$12 formulary, \$25 nonformulary; 34 day supply. \$300/person, \$600/family out-of-pocket maximum	\$24 formulary, \$50 nonformulary; 102 day supply. Out-of-pocket maximum applies.
Mississippi	State Health Plan	\$50 deductible, then \$10 generic, \$25 preferred brand, \$35 other; 30 day supply	Deductible applies. \$20 generic, \$50 preferred brand, \$70 other; 90 day supply
Missouri	Mercy HMO standard	\$10 generic, \$25 brand formulary, \$40 nonformulary; 30 day supply	\$20 generic, \$50 brand formulary, \$80 nonformulary; 90 day supply
	Copay Plan		
Montana	Basic indemnity, Blue Choice HMO ²	10% (\$8 minimum) generic; 20% (\$16 minimum) formulary brand; 30% (\$24 minimum) nonformulary brand; 30 day supply	\$20 + 10% of charges over \$400 generic; \$40 + 20% of charges over \$400 formulary; \$60 + 30% of charges over \$400 nonformulary; 90 day supply
Nebraska	BlueChoice Advantage POS	\$15 generic, \$30 brand; 30 day supply	\$70 each 180 day supply
Nevada	PPO	\$5 generic, \$22 preferred brand, \$40 nonpreferred brand;	\$15 generic, \$55 preferred brand, \$100 nonpreferred brand;
	HMO	\$7 generic, \$14 preferred brand, \$50 nonpreferred generic or brand	\$14 generic, \$60 preferred brand
New Hampshire	Anthem POS	\$50 deductible, then 20% copay to \$2,000/person annual maximum	\$4/order for maintenance drugs
New Jersey	HMO	\$5 generic, \$10 preferred brand, \$20 other; 30 day supply	\$15 generic, \$25 brand; 90 day supply
	Traditional	\$6 generic, \$11 preferred brand, \$23 other; 30 day supply	\$6 generic, \$17 preferred brand, \$28 other; 90 day supply
New Mexico	HMO, BCBS Triple Option POS	20% generic copay, 30% brand formulary, 40% brand nonformulary	\$15 generic formulary, \$20 generic nonformulary, \$25 brand formulary; 90 day supply
New York	Empire plan	\$5 generic, \$15 brand (with no generic equivalent); 90 day supply	\$5 generic, \$15 brand (with no generic equivalent); 90 day supply
	HMO Blue	\$5 generic, \$15 brand formulary, \$30 nonformulary; 30 day supply.	Can order 90 day supply with 3 copayments (e.g., \$15 for 90 day supply of generic drug)
North Carolina	State Plan	\$10 generic, \$25 preferred brand with no generic equivalent, \$35 preferred brand with generic equivalent, \$40 nonpreferred brand; 34 day supply. \$2,500/person copay limit per year	N/A

² Montana: Eckerd Health Services pharmacy plan is an automatic add-on to medical plan selected.

Table A7: Characteristics of Prescription Drug Coverage in State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Patient Copayments	
		At Pharmacy	Mail Order
North Dakota	PPO Basic	\$5 + 15% generic, \$15 + 25% formulary brand, \$25 + 25% nonformulary brand; 34 day supply	N/A
Ohio	PERS Health Care	\$4.50 generic, \$9 brand with no generic equivalent, \$12 brand with generic equivalent; 34 day supply. 60% reimbursement at non-plan pharmacies	\$4.50 generic, \$9 brand with no generic equivalent, \$12 brand with generic equivalent; 120 day supply
Oklahoma	Health Choice low option	In-plan: up to \$25 for prescriptions of less than \$100 (i.e., plan pays 100% of cost above \$25 for prescriptions less than \$100); 25% up to \$50 maximum for prescriptions of more than \$100; generic/preferred network mandated; 34 day supply or 100 units; \$2,500/person out-of-pocket maximum. Out-of-plan: member pays cost to \$75 plus dispensing fee; no out-of-pocket maximum for nonpreferred/out of network.	N/A
	PacifiCare HMO-high	\$10 tier 1, \$25 tier 2, \$45 tier 3; 30 day supply or 100 units	N/A
Oregon	Kaiser Permanente	50% to \$150 maximum, plus \$2 per prescription for 30 day supply.	50% to \$300 maximum, plus \$2 per prescription for 90 day supply of maintenance drugs
	Clear Choice	50% to \$150 maximum, plus \$2 per prescription for 30 day supply or for 90 day supply of generic drugs	50% to \$150 maximum, plus \$2 per prescription for 30 day supply or for 90 day supply of generic drugs
Pennsylvania	BCBS traditional	\$7 generic or brand when generic not available; 30 day supply. \$15 for maintenance prescriptions from 30-100 days.	\$15 per prescription for chronic conditions; up to 100 day supply
Rhode Island	BCBS PPO	20%+\$7 generic, \$25 formulary brand, \$40 nonformulary brand	N/A
South Carolina	Companion HMO	\$10 generic, \$25 preferred brand, 40 nonpreferred brand; 31 day supply. \$1,000/person annual copayment maximum	N/A
South Dakota	State plan – low and high options	\$11 generic, \$22 brand formulary, \$31 for higher-priced brand; 30 day supply. \$800/person, \$2,000/family out-of-pocket maximum	\$17 generic, \$31 brand formulary, \$48 for higher-priced brand; 31-90 day supply of approved maintenance drugs. Out-of-pocket maximum applies
Tennessee	HMOs	\$5 generic, \$15 brand	N/A
	PPO	\$5 generic, \$15 preferred brand, \$25 nonpreferred brand in-plan; member pays maximum allowable charge in addition to \$25 copay for nonpreferred brand drugs. \$720/person maximum	N/A

Table A7: Characteristics of Prescription Drug Coverage in State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Patient Copayments	
		At Pharmacy	Mail Order
Texas	HMOs, HealthSelect PPO	\$5 generic, \$20 preferred brand, \$35 nonpreferred brand; 30 day supply. 70% reimbursement—copay, out-of-plan for PPO (no out-of-plan coverage at HMOs)	\$10 generic, \$40 preferred brand, \$70 nonpreferred brand; 90 day supply.
Utah	PEHP Exclusive HMO	Member pays 20% of discounted cost of preferred drugs, \$5 minimum copay, no maximum; 30 day supply. Member pays 50% of nonpreferred drug cost, \$5 minimum, no maximum	Member pays 20% of discounted cost of preferred drugs, \$5 minimum, \$50 maximum; 90 day supply. Member pays 50% of nonpreferred drug cost, \$5 minimum, no maximum
	PEHP Preferred PPO	Member pays 20% of discounted cost of preferred drugs, \$5 minimum copay, no maximum; 90 day supply. Member pays 50% of nonpreferred drug cost, \$5 minimum, no maximum	Member pays 20% of discounted cost of preferred drugs, \$5 minimum, \$50 maximum; 90 day supply. Member pays 50% of nonpreferred drug cost, \$5 minimum, no maximum
Vermont	TotalChoice indemnity	Annual fee: \$25/person, \$75/family as deductible. 20% copay per prescription. Maximum copay: \$300/covered member for mail order and retail combined; thereafter plan pays 100% for rest of year	
Virginia	Kaiser Permanente HMO	\$5 at Kaiser pharmacy; \$15 at participating community pharmacy; 60 day supply, generic mandated	\$3 for up to 90 day supply; generic mandated
	Cost Alliance	\$17 for up to 34 day supply; \$34 for 34-90 day supply; generic mandated	\$25 for up to 90 day supply; generic mandated
Washington	Kaiser Permanente HMO	\$10 formulary generic, insulin and diabetic supplies; \$25 formulary brand; 30 day supply	\$20 generic, insulin and diabetic supplies; \$50 formulary brand; 90 day supply
	Premiera Blue Cross Foundation	\$10 generic, insulin and disposable diabetic supplies; \$25 formulary brand; \$40 nonformulary brand; 30 day supply	\$20 generic, insulin and disposable diabetic supplies; \$50 formulary brand; \$80 nonformulary brand; 90 day supply

Table A7: Characteristics of Prescription Drug Coverage in State Government Retiree Health Plans—Pre-Medicare, FY 2003

State	Plan: ▶ Lowest-cost ▶ Highest-cost	Patient Copayments	
		At Pharmacy	Mail Order
West Virginia ³	State PPO	\$5 generic, \$15 preferred brand, \$30 nonpreferred brand; 34 day supply. 90 day supply of maintenance drugs available for 2 copayments. \$75/person, \$125/family deductible. \$1,750/person, \$3,500/family out-of-pocket maximum	\$5 generic, \$15 preferred brand, \$30 nonpreferred brand; 34 day supply or 35-90 day supply for 2 copayments. Maintenance drugs only. Deductibles, out-of-pocket maximums apply
	Health Plan HMO A	\$10 generic, or member pays 40% for brand when generic not available. Nonformulary brand not covered. \$5,000 annual maximum	No mail order
Wisconsin	Mercycare HMO	\$5 generic, \$17.25 brand; 30 day supply. \$300/person, \$600/family out-of-pocket maximum	No mail order
	Standard	\$7 generic, \$14 brand	N/A
Wyoming	POS Option II	\$10 generic, \$20 preferred, \$40 nonpreferred; 30 day supply	\$10 generic, \$20 preferred, \$40 nonpreferred; 60 day supply

³ West Virginia: Retirees with incomes below 250% of the federal poverty level are eligible for assistance with drug copayments.

Table A8: Characteristics of Prescription Drug Coverage in State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan ▶ Lowest-cost ▶ Highest-cost	Patient Copayments	
		At Pharmacy	Mail Order
Alabama	SEHIP	\$50/person deductible, \$5 generic, \$15 preferred brands (\$20 for maintenance drugs), \$35 other brands; 60 day supply of maintenance drugs.	N/A
Alaska	State Retiree Health Plan	Generic: \$5 for 30 day supply, \$10 for 31-90 days Brand: \$10 for 30 days, \$20 for 31-90 days	Generic: \$0 Brand: \$2
Arizona	Medicare + Choice HMO	\$10 generic, \$20 brand	\$20 generic, \$40 brand; 90 day supply
	Cigna PPO	\$10 generic, \$20 brand, \$40 nonpreferred brand; 30 day supply	N/A
Arkansas	QualChoice HMO, BCBS PPO	\$10 generic, \$25 brand, \$50 nonformulary brand; 34 day supply	\$20 generic, \$50 brand, \$100 nonformulary brand; 90 day supply
California	Western Health, PERSCare	\$5 generic, \$15 brand, \$30 nonformulary brand; 30 day supply	\$10 generic, \$25 brand, \$45 nonformulary brand; 90 day supply
Colorado	Kaiser Permanente	50% copay to \$30 for 60 day supply	50% copay to \$30 for 60 day supply
	Mutual of Omaha	\$100 deductible, then 50% copay with \$7 minimum, \$50 maximum copay for 30 day supply	\$15 generic, \$50 brand; 90 day supply
Connecticut	POS in-plan, POE	\$3 generic, \$6 brand; 34 day supply, or 90 days for maintenance drugs	\$3 generic, \$6 brand; 90 day supply
	POS out-of-plan	80% coinsurance	No mail order
Delaware	BlueCare Carveout	\$5 minimum copay; multisource brands covered at 35%; single source brands covered at 25%	No mail order
	BCBS Comprehensive	\$5 minimum copay; Multisource brands covered at 30%; Single source brands covered at 20%	No mail order
Florida	State PPO	\$7 generic, \$20 preferred brand, \$35 nonpreferred brand; 30 day supply	\$10.50 generic, \$30 preferred brand, \$52.50 nonpreferred brand; 90 day supply

Note: Prescription drug benefits shown in this table are part of the health care plans detailed in Table A6. An “N/A” answer indicates that either the information was not available and/or not applicable to the plan shown.

Table A8: Characteristics of Prescription Drug Coverage in State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan ▶ Lowest-cost ▶ Highest-cost	Patient Copayments	
		At Pharmacy	Mail Order
Georgia	Kaiser Permanente Medicare + Choice HMO	At Kaiser Permanente pharmacy: \$10 generic, \$15 preferred brand; at Eckerd's pharmacy: \$16 generic, \$21 preferred brand	May order up to 90 day supply by mail at same price as retail, plus \$1.50 shipping
	Indemnity	\$10 generic, \$20 preferred brand, 20% coinsurance for nonpreferred brand with \$35 minimum, \$75 maximum. Monthly maximum \$100/person, \$200/family for generic and preferred brand	No mail order
Hawaii ¹			
Idaho	State Plan	\$12 generic, \$18 brand if generic not available, \$40 brand if generic is available; 34 day supply, or 90 day supply of maintenance drugs, subject to 2 copays. \$10 copay for diabetic supplies. \$25 copay + 20% from non-network pharmacy	No mail order
Illinois	Indemnity	\$7 generic, \$14 formulary brand, \$28 nonformulary brand; 30 day supply	\$14 generic, \$28 formulary brand, \$56 nonformulary brand; 90 day supply
Indiana	No coverage in health plan after age 65		
Iowa	Managed care options	\$5 preferred generic, \$15 preferred brand, greater of \$30 or 25% for nonpreferred brand or nonpreferred generic	\$10 generic, \$30 preferred brand, \$60 nonpreferred brand or nonpreferred generic; 90 day supply
Kansas	All plans	Member pays 20% generic, 30% preferred brand, 50% nonpreferred brand; 30 day supply. \$70 special case drugs. \$2,400/person maximum out-of-pocket limit on generic, preferred brand and special case drugs only (i.e., no limit applies to co-insurance for nonpreferred brand drugs).	Available at lower cost
Kentucky	N/A	N/A	N/A

¹ Hawaii: The state of Hawaii has created an Employer-Union Health Benefits Trust Fund, effective 7/1/03. The Fund will offer multiple options for pre-Medicare and Medicare-eligible retirees. Details have not been finalized at this time.

Table A8: Characteristics of Prescription Drug Coverage in State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan ▶ Lowest-cost ▶ Highest-cost	Patient Copayments	
		At Pharmacy	Mail Order
Louisiana	POS/EPO	50% at network pharmacies, \$40/prescription maximum, to \$1,000/person annual maximum. Thereafter, \$0 copay generic, \$15 brand. Non-network: reimbursement to 50% of network rate	No mail order
Maine	Anthem HMO	\$10 generic, \$20 name brand	N/A
Maryland	Prescription drugs not included in health plan		
Massachusetts	Fallon Senior Preferred	\$8 tier I, \$15 tier II, \$35 tier III; 30 day supply	\$18 tier I, \$39 tier II, \$99 tier III; 90 day supply of maintenance drugs
	GIC indemnity Medicare extension	\$7 generic, \$20 preferred brand, \$40 nonpreferred brand; 30 day supply	\$14 generic, \$40 preferred brand, \$70 nonpreferred brand; 90 day supply of maintenance drugs
Michigan	State PPO	\$7 generic, \$12 brand	\$5 generic, \$10 brand; 90 day supply of maintenance drugs
Minnesota	State Health Plan	\$12 formulary, \$25 nonformulary; 34 day supply. \$300/person, \$600/family out-of-pocket maximum	\$24 formulary, \$50 nonformulary; 102 day supply. Out of pocket maximum applies
Mississippi	State Health Plan	\$50 deductible, then \$10 generic, \$25 preferred brand, \$35 other; 30 day supply	Deductible applies. \$20 generic, \$50 preferred brand, \$70 other; 90 day supply
Missouri	Mercy HMO standard,	\$10 generic, \$25 formulary brand, \$40 nonformulary brand; 30 day supply	\$20 generic, \$50 formulary brand, \$80 nonformulary brand; 90 day supply
	Copay plan		
Montana	Basic indemnity, Blue Choice HMO ²	10% (\$8 minimum) generic; 20% (\$16 minimum) formulary brand; 30% (\$24 minimum) nonformulary brand; 30 day supply	\$20 + 10% of charges of more than \$400 generic; \$40 + 20% of charges of more than \$400 formulary brand; \$60 + 30% of charges over \$400 nonformulary brand; 90 day supply
Nebraska	No coverage in health plan past age 65		
Nevada	PPO	\$5 generic, \$22 preferred brand, \$40 nonpreferred brand;	\$15 generic, \$55 preferred brand, \$100 nonpreferred brand;
	HMO	\$7 generic, \$14 preferred brand, \$50 nonpreferred generic or brand	\$14 generic, \$60 preferred brand
New Hampshire	Medicare supplement	\$50 deductible, then 20% copay to \$2,000/person annual out-of-pocket maximum	\$4/order for maintenance drugs
New Jersey	HMO	\$5 generic, \$10 preferred brand, \$20 other; 30 day supply	\$15 generic, \$25 brand; 90 day supply
	Traditional	\$6 generic, \$11 preferred brand, \$23 other; 30 day supply	\$6 generic, \$17 preferred brand, \$28 other; 90 day supply

² Montana: Eckerd Health Services pharmacy plan is an automatic add-on to medical plan selected.

Table A8: Characteristics of Prescription Drug Coverage in State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan ▶ Lowest-cost ▶ Highest-cost	Patient Copayments	
		At Pharmacy	Mail Order
New Mexico	St. Josephs HMO	\$7 generic, \$14 brand; \$750 annual maximum benefit formulary brand, but no limits on generic drugs	N/A
	BCBS carveout	20% generic copay, 30% formulary brand, 40% nonformulary brand	\$15 formulary generic, \$20 nonformulary generic, \$25 formulary brand; 90 day supply
New York	Empire plan	\$5 generic, \$15 brand (with no generic equivalent); 90 day supply	\$5 generic, \$15 brand (with no generic equivalent); 90 day supply
	HMO Blue	\$5 generic, \$15 formulary brand, \$30 nonformulary brand; 30 day supply.	Can order 90 day supply with 3 copayments (e.g., \$15 copay for 90 day supply of generic drug)
North Carolina	State Plan	\$10 generic, \$25 preferred brand with no generic equivalent, \$35 preferred brand with generic equivalent, \$40 nonpreferred brand; 34 day supply. \$2,500/person copay limit per year	N/A
North Dakota	PPO	\$5 + 15% generic, \$15 + 25% brand, \$25 + 25% nonformulary	N/A
Ohio	PERS Health Plan	\$4.50 generic, \$9 brand with no generic equivalent, \$12 brand with generic equivalent; 34 day supply. 40% copay at non-plan pharmacies	\$4.50 generic, \$9 brand with no generic equivalent, \$12 brand with generic equivalent; 120 day supply
Oklahoma	Low option	\$10 generic, \$25 formulary brand, \$50 nonformulary brand; 34 day supply or 100 units. \$250 deductible; \$1,500 out-of-pocket maximum	N/A
	Health Choice high option	In-plan: up to \$25 for prescriptions of less than \$100 (i.e., plan pays 100% of cost above \$25 for prescriptions of less than \$100); 25% up to \$50 maximum for prescriptions of more than \$100; generic/preferred network mandated; 34 day supply or 100 units. \$2,500 out-of-pocket maximum; no maximum for nonpreferred/out-of-network	N/A
Oregon	Providence HMO, Clear Choice	50% to \$150 maximum, plus \$2 per prescription for 30 day supply or for 90 day supply of generic drugs	Available; same price as retail.

Table A8: Characteristics of Prescription Drug Coverage in State Government Retiree Health Plans—Medicare-Eligible, FY 2003

State	Plan ▶ Lowest-cost ▶ Highest-cost	Patient Copayments	
		At Pharmacy	Mail Order
Pennsylvania	Medicare supplement with major medical	\$7 generic or brand when generic not available; 30 day supply. \$15 for maintenance prescriptions from 30-100 days	\$15 per prescription for chronic conditions; up to 100 day supply
Rhode Island			
South Carolina	State Plans	\$7 generic, \$22 brand; 31 day supply. \$1,100/person copayment maximum	\$16 generic, \$50 brand; 90 day supply. Maximum applies
South Dakota	Prescription drugs not included in health plan		
Tennessee	Tennessee PPO	\$5 generic, \$15 preferred brand, \$25 nonpreferred brand	N/A
Texas	HMOs, Health Select PPO	\$5 generic, \$20 preferred brand, \$35 nonpreferred brand; 30 day supply. 70% reimbursement—copay, out-of-plan for PPO (no out-of-plan coverage at HMOs)	\$10 generic, \$40 preferred brand, \$70 nonpreferred brand; 90 day supply
Utah	High Option	\$200 deductible, then copays. With card: 20% of discounted fee for generic, 40% of discounted fee for brand, 50% of discounted fee for nonpreferred brand. Without card: applicable copay + difference between full cash price and discounted fee	Member pays 20% up to \$50 maximum for generic and brand; 50% for nonpreferred brand; 90 day supply
Vermont	Health Guard PPO, Total Choice indemnity	Annual fee \$25/person, \$75/family as deductible. 20% copay per prescription. Maximum copay \$300/covered member for mail order and retail combined; thereafter plan pays 100% for rest of year	
Virginia	Advantage 65	\$27 copay for up to 34 day supply; \$54 copay for 35-90 day supply	\$32 copay for up to 90 day supply
Washington	Premiera Blue Cross Foundation	\$10 generic, insulin and disposable diabetic supplies; \$25 formulary brand; \$40 nonformulary brand; 30 day supply	\$20 generic, insulin and disposable diabetic supplies; \$50 formulary brand; \$80 nonformulary brand; 90 day supply
West Virginia	Medicare supplement	\$75/person, \$125/family deductible, then \$5 generic, \$15 preferred brand, \$30 nonpreferred brand; 34 day supply. 90 day supply of maintenance drugs available for 2 copayments. \$1,750/person, \$3,500/family out-of-pocket maximum	Deductibles, out-of-pocket maximums apply. \$5 generic, \$15 preferred brand, \$30 nonpreferred brand; 34 day supply; or 35-90 day supply for 2 copayments. Maintenance drugs only
Wisconsin	Mercycare HMO	\$5 generic, \$17.25 brand; 30 day supply. \$300/person, \$600/family out-of-pocket maximum.	No mail order
	Medicare Plus	\$7 generic, \$14 brand	N/A
Wyoming	PPO Option II	\$10 generic, \$20 preferred, \$40 nonpreferred; 30 day supply	\$10 generic, \$20 preferred, \$40 nonpreferred; 60 day supply