

**UNIVERSITY OF NEBRASKA
HEALTH INSURANCE
RETIREE PREMIUMS
2010**

<u>Coverage</u>	<u>Blue Cross Low</u>	<u>Blue Cross Basic</u>	<u>Blue Cross High</u>		<u>Blue Cross Dental</u>
Non-Medicare					
(O) Retiree Only	\$992.00	\$1,168.00	\$1,242.00	(A)	\$28.00
(P) Retiree & Spouse	2,126.00	2,504.00	2,660.00	(B)	48.00
(Q) Retiree & Children	1,650.00	1,944.00	2,134.00	(C)	50.00
(R) Retiree & Family	2,952.00	3,476.00	3,816.00	(D)	80.00
Supplemented by Medicare					
(I) Retiree Only, on Medicare	\$408.00	\$482.00	\$508.00	(A)	\$28.00
(J) Retiree & Spouse, One on Medicare	1,544.00	1,818.00	1,996.00	(B)	48.00
(K) Retiree & Spouse, Both on Medicare	816.00	962.00	1,014.00	(B)	48.00
(L) Retiree & Children, on Medicare	1,068.00	1,258.00	1,326.00	(C)	50.00
(M) Retiree & Family, One on Medicare	2,370.00	2,790.00	2,944.00	(D)	80.00
(N) Retiree & Family, Both on Medicare	1,894.00	2,230.00	2,354.00	(D)	80.00