

2025

IRMP Medical and Vision Premiums

IRMP Anthem High Deductible Health Plan (HDHP)			
	You Only*, Spouse** Only Child(ren) Only¹	You + Spouse** You + Child(ren)¹, Spouse** + Child(ren)¹	You + Spouse** + Child(ren)¹
Monthly Premium	\$1,348	\$2,696	\$4,044
Retiree VSP Basic Vision			
	You Only*, Spouse** Only Child(ren) Only¹	You + Spouse** You + Child(ren)¹, Spouse** + Child(ren)¹	You + Spouse** + Child(ren)¹
Monthly Premium	\$7.29	\$14.58	\$16.40
Retiree VSP Vision Plus			
Monthly Premium	\$16.97	\$33.94	\$38.18

**You only = Individual coverage of any eligible retiree, spouse or same sex domestic partner, or child.*

***Any reference to spouse includes domestic partner*

¹ Same price for one child or multiple children

IRMP Anthem Medicare Preferred 25P (PPO)	
Monthly Premium	\$209.93 per individual
IRMP Anthem Medicare Preferred 15P (PPO)	
Monthly Premium	\$390.32 per individual