

## 2018 monthly insurance premiums for funded survivors

### Spouse eligible for Medicare/children eligible for Medicare

	Spouse	Spouse/children	Children only
Standard Plan	\$79.68	\$125.86	\$46.18
Savings Plan	N/A	N/A	N/A
Medicare Supplement	\$97.68	\$161.86	\$64.18*
TRICARE Supplement	N/A	N/A	N/A
Dental	\$0.00	\$13.72	\$13.72
Dental Plus	\$27.12	\$63.20	\$36.08
Vision	\$8.00	\$17.16	\$9.16
Tobacco-use premium	\$40.00	\$60.00	\$40.00

### Spouse eligible for Medicare/children not eligible for Medicare

	Spouse	Spouse/children	Children only
Standard Plan	\$79.68	\$125.86	\$46.18
Savings Plan	N/A	N/A	\$10.78
Medicare Supplement	\$97.68	\$143.86	N/A
TRICARE Supplement	N/A	N/A	N/A
Dental	\$0.00	\$13.72	\$13.72
Dental Plus	\$27.12	\$63.20	\$36.08
Vision	\$8.00	\$17.16	\$9.16
Tobacco-use premium	\$40.00	\$60.00	\$40.00

### Spouse not eligible for Medicare/children eligible for Medicare

	Spouse	Spouse/children	Children only
Standard Plan	\$97.68	\$143.86	\$46.18
Savings Plan	\$9.70	\$20.48	N/A
Medicare Supplement	N/A	\$161.86*	\$64.18*
TRICARE Supplement	N/A	N/A	N/A
Dental	\$0.00	\$13.72	\$13.72
Dental Plus	\$27.12	\$63.20	\$36.08
Vision	\$8.00	\$17.16	\$9.16
Tobacco-use premium	\$40.00	\$60.00	\$40.00

\*This premium applies only if one or more children are eligible for Medicare.

### Spouse not eligible for Medicare/children not eligible for Medicare

	Spouse	Spouse/children	Children only
Standard Plan	\$97.68	\$143.86	\$46.18
Savings Plan	\$9.70	\$20.48	\$10.78
Medicare Supplement	N/A	N/A	N/A
TRICARE Supplement	\$62.50	\$121.50	\$61.00
Dental	\$0.00	\$13.72	\$13.72
Dental Plus	\$27.12	\$63.20	\$36.08
Vision	\$8.00	\$17.16	\$9.16
Tobacco-use premium	\$40.00	\$60.00	\$40.00