## Steelworkers Health and Welfare Fund

## **OPEIU Local 45- Florida**

September 1, 2025 through August 31, 2026

Option 1	Employee Only	Employee +	Employee +	Employee +	Family
		Child	Children	Spouse	
Medical PPO 100/80					
Prescription Drug:					
Retail: \$10/\$40/ \$70					
Mail Order: \$20/\$50/ \$100					
Total Med / RX Premium	\$934.70	\$2,225.07	\$2,962.40	\$2,225.07	\$2,962.40
Dental (Optional)	\$27.10	\$54.18	\$75.54	\$54.18	\$75.54
Vision (Optional)	\$5.44	\$10.86	\$12.99	\$10.86	\$12.99
Combined	\$967.24	\$2,290.11	\$3,050.93	\$2,290.11	\$3,050.93

Option 2	Employee Only	Employee	Employee	Employee	
		+	+	+	Family
		Child	Children	Spouse	
Medical PPO 90/70					
Prescription Drug:					
Retail: \$10/\$40/ \$70					
Mail Order: \$30/\$100/ \$175					
Total Med / RX Premium	\$769.75	\$1,829.22	\$2,434.57	\$1,829.22	\$2,434.57
Dental (Optional)	\$27.10	\$54.18	\$75.54	\$54.18	\$75.54
Vision (Optional)	\$5.44	\$10.86	\$12.99	\$10.86	\$12.99
Combined	\$802.29	\$1,894.26	\$2,523.10	\$1,894.26	\$2,523.10

Option 3	Employee Only	Employee + Child	Employee + Children	Employee + Spouse	Family		
Medical PPO 80/60							
Prescription Drug:							
Retail: \$10/\$40/ \$70							
Mail Order: \$30/\$100/ \$175							
Total Med / RX Premium	\$751.89	\$1,786.34	\$2,377.40	\$1,786.34	\$2,377.40		
Dental (Optional)	\$27.10	\$54.18	\$75.54	\$54.18	\$75.54		
Vision (Optional)	\$5.44	\$10.86	\$12.99	\$10.86	\$12.99		
Combined	\$784.43	\$1,851.38	\$2,465.93	\$1,851.38	\$2,465.93		
January 1, 2025 through December 31, 2025							
Medicare Eligible	Employee Only	Employee + Spouse					
Medicare Advantage Option 1	\$271.00	\$542.00					
Medicare Advantage Option 2	\$165.00	\$330.00					
Dental (Optional)	\$27.10	\$54.20					