

## The Aerospace Corporation

### 2024 Aerospace Retiree Medical Monthly Cost-Sharing: Tier A and Transition Rates

| Medical Coverage   | Monthly Retiree Cost (Tier A) | Monthly DDB Amount Paid by Plan* | Monthly Premium | CY2024 EE Cost / Month | Monthly Retiree Transition Cost Under Temporary Subsidy: Lesser of (1) & (2)** | Monthly Transition Subsidy Amount |
|--|-------------------------------|----------------------------------|-----------------|------------------------|--|-----------------------------------|
|  | (1)                           |                                  |                 | (2)                    | (3)  | (1) - (3)                         |
| <b>Anthem Blue Cross PPO - Nationwide (Under 65) / Anthem Medicare Preferred PPO (Over 65)</b> |                               |                                  |                 |                        |  |                                   |
| Single: Under 65   | \$1,073.92                    | \$244.00                         | \$1,317.92      | \$206.73               | \$206.73   | \$867.19                          |
| Single: Over 65  | \$112.58                      | \$244.00                         | \$356.58        | \$206.73               | \$112.58   | \$0.00                            |
| 2 Party: Retiree & Spouse Under 65   | \$2,147.83                    | \$488.00                         | \$2,635.83      | \$454.30               | \$454.30   | \$1,693.53                        |
| 2 Party: Retiree & Child(ren) Under 65   | \$2,147.83                    | \$488.00                         | \$2,635.83      | \$371.77               | \$371.77   | \$1,776.06                        |
| 2 Party: Retiree & Spouse Over 65  | \$225.16                      | \$488.00                         | \$713.16        | \$454.30               | \$225.16   | \$0.00                            |
| 2 Party: Retiree & Spouse 1 Under 65 & 1 Over 65   | \$1,186.50                    | \$488.00                         | \$1,674.50      | \$454.30               | \$454.30   | \$732.20                          |
| 2 Party: Retiree & Child(ren) 1 Over 65  | \$1,186.50                    | \$488.00                         | \$1,674.50      | \$371.77               | \$371.77   | \$814.73                          |
| Family: All Under 65   | \$3,465.76                    | \$488.00                         | \$3,953.76      | \$639.97               | \$639.97   | \$2,825.79                        |
| Family: 2 Over 65 + 1 or more Under 65   | \$1,543.08                    | \$488.00                         | \$2,031.08      | \$639.97               | \$639.97   | \$903.11                          |
| Family: 1 Over 65 + 2 or more Under 65   | \$2,504.42                    | \$488.00                         | \$2,992.42      | \$639.97               | \$639.97   | \$1,864.45                        |
| <b>Anthem Blue Cross EPO Non-CA (Under 65) / Anthem Medicare Preferred PPO (Over 65)</b>       |                               |                                  |                 |                        |  |                                   |
| Single: Under 65   | \$1,027.84                    | \$244.00                         | \$1,271.84      | \$202.67               | \$202.67   | \$825.17                          |
| Single: Over 65  | \$112.58                      | \$244.00                         | \$356.58        | \$202.67               | \$112.58   | \$0.00                            |
| 2 Party: Retiree & Spouse Under 65   | \$2,055.66                    | \$488.00                         | \$2,543.66      | \$445.36               | \$445.36   | \$1,610.30                        |
| 2 Party: Retiree & Child(ren) Under 65   | \$2,055.66                    | \$488.00                         | \$2,543.66      | \$364.46               | \$364.46   | \$1,691.20                        |
| 2 Party: Retiree & Spouse Over 65  | \$225.16                      | \$488.00                         | \$713.16        | \$445.36               | \$225.16   | \$0.00                            |
| 2 Party: Retiree & Spouse 1 Under 65 & 1 Over 65   | \$1,140.42                    | \$488.00                         | \$1,628.42      | \$445.36               | \$445.36   | \$695.06                          |
| 2 Party: Retiree & Child(ren) 1 Over 65  | \$1,140.42                    | \$488.00                         | \$1,628.42      | \$364.46               | \$364.46   | \$775.96                          |
| Family: All Under 65   | \$3,327.50                    | \$488.00                         | \$3,815.50      | \$627.38               | \$627.38   | \$2,700.12                        |
| Family: 2 Over 65 + 1 or more Under 65   | \$1,497.00                    | \$488.00                         | \$1,985.00      | \$627.38               | \$627.38   | \$869.62                          |
| Family: 1 Over 65 + 2 or more Under 65   | \$2,412.26                    | \$488.00                         | \$2,900.26      | \$627.38               | \$627.38   | \$1,784.88                        |
| <b>Anthem Blue Cross HMO CA (Under 65) / Anthem Blue Cross Senior Secure HMO (Over 65)</b>     |                               |                                  |                 |                        |  |                                   |
| Single: Under 65   | \$988.23                      | \$244.00                         | \$1,232.23      | \$202.67               | \$202.67   | \$785.56                          |
| Single: Over 65  | \$80.85                       | \$244.00                         | \$324.85        | \$202.67               | \$80.85  | \$0.00                            |
| 2 Party: Retiree & Spouse Under 65   | \$1,976.44                    | \$488.00                         | \$2,464.44      | \$445.36               | \$445.36   | \$1,531.08                        |
| 2 Party: Retiree & Child(ren) Under 65   | \$1,976.44                    | \$488.00                         | \$2,464.44      | \$364.46               | \$364.46   | \$1,611.98                        |
| 2 Party: Retiree & Spouse Over 65  | \$161.70                      | \$488.00                         | \$649.70        | \$445.36               | \$161.70   | \$0.00                            |
| 2 Party: Retiree & Spouse 1 Under 65 & 1 Over 65   | \$1,069.08                    | \$488.00                         | \$1,557.08      | \$445.36               | \$445.36   | \$623.72                          |
| 2 Party: Retiree & Child(ren) 1 Over 65  | \$1,069.08                    | \$488.00                         | \$1,557.08      | \$364.46               | \$364.46   | \$704.62                          |
| Family: All Under 65   | \$3,208.67                    | \$488.00                         | \$3,696.67      | \$627.38               | \$627.38   | \$2,581.29                        |
| Family: 2 Over 65 + 1 or more Under 65   | \$1,393.93                    | \$488.00                         | \$1,881.93      | \$627.38               | \$627.38   | \$766.55                          |
| Family: 1 Over 65 + 2 or more Under 65   | \$2,301.31                    | \$488.00                         | \$2,789.31      | \$627.38               | \$627.38   | \$1,673.93                        |

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|--|-------------------------------|----------------------------------|-----------------|------------------------|--|-----------------------------------|
|  | (1)                           |                                  |                 | (2)                    | (3)  | (1) - (3)                         |
| <b>Kaiser Permanente HMO California (Under 65) / Kaiser Senior Advantage HMO (Over 65)</b>             |                               |                                  |                 |                        |  |                                   |
| Single: Under 65   | \$464.75                      | \$244.00                         | \$708.75        | \$155.34               | \$155.34   | \$309.41                          |
| Single: Over 65  | \$0.00                        | \$172.38                         | \$172.38        | \$155.34               | \$0.00   | \$0.00                            |
| 2 Party: Retiree & Spouse Under 65   | \$929.50                      | \$488.00                         | \$1,417.50      | \$341.23               | \$341.23   | \$588.27                          |
| 2 Party: Retiree & Child(ren) Under 65   | \$929.50                      | \$488.00                         | \$1,417.50      | \$279.27               | \$279.27   | \$650.23                          |
| 2 Party: Retiree & Spouse Over 65  | \$0.00                        | \$344.76                         | \$344.76        | \$341.23               | \$0.00   | \$0.00                            |
| 2 Party: Retiree & Spouse 1 Under 65 & 1 Over 65   | \$393.13                      | \$488.00                         | \$881.13        | \$341.23               | \$341.23   | \$51.90                           |
| 2 Party: Retiree & Child(ren) 1 Over 65  | \$393.13                      | \$488.00                         | \$881.13        | \$279.27               | \$279.27   | \$113.86                          |
| Family: All Under 65   | \$1,638.25                    | \$488.00                         | \$2,126.25      | \$480.65               | \$480.65   | \$1,157.60                        |
| Family: 2 Over 65 + 1 or more Under 65   | \$565.51                      | \$488.00                         | \$1,053.51      | \$480.65               | \$480.65   | \$84.86                           |
| Family: 1 Over 65 + 2 or more Under 65   | \$1,101.88                    | \$488.00                         | \$1,589.88      | \$480.65               | \$480.65   | \$621.23                          |
| <b>Kaiser Permanente HMO Mid-Atlantic - Wash DC (Under 65) / Kaiser Senior Advantage HMO (Over 65)</b> |                               |                                  |                 |                        |  |                                   |
| Single: Under 65   | \$464.75                      | \$244.00                         | \$708.75        | \$155.34               | \$155.34   | \$309.41                          |
| Single: Over 65  | \$61.11                       | \$244.00                         | \$305.11        | \$155.34               | \$61.11  | \$0.00                            |
| 2 Party: Retiree & Spouse Under 65   | \$929.50                      | \$488.00                         | \$1,417.50      | \$341.23               | \$341.23   | \$588.27                          |
| 2 Party: Retiree & Child(ren) Under 65   | \$929.50                      | \$488.00                         | \$1,417.50      | \$279.27               | \$279.27   | \$650.23                          |
| 2 Party: Retiree & Spouse Over 65  | \$122.22                      | \$488.00                         | \$610.22        | \$341.23               | \$122.22   | \$0.00                            |
| 2 Party: Retiree & Spouse 1 Under 65 & 1 Over 65   | \$525.86                      | \$488.00                         | \$1,013.86      | \$341.23               | \$341.23   | \$184.63                          |
| 2 Party: Retiree & Child(ren) 1 Over 65  | \$525.86                      | \$488.00                         | \$1,013.86      | \$279.27               | \$279.27   | \$246.59                          |
| Family: All Under 65   | \$1,638.25                    | \$488.00                         | \$2,126.25      | \$480.65               | \$480.65   | \$1,157.60                        |
| Family: 2 Over 65 + 1 or more Under 65   | \$830.97                      | \$488.00                         | \$1,318.97      | \$480.65               | \$480.65   | \$350.32                          |
| Family: 1 Over 65 + 2 or more Under 65   | \$1,234.61                    | \$488.00                         | \$1,722.61      | \$480.65               | \$480.65   | \$753.96                          |
| <b>Kaiser Permanente HMO Colorado (Under 65) / Kaiser Senior Advantage HMO (Over 65)</b>               |                               |                                  |                 |                        |  |                                   |
| Single: Under 65   | \$464.75                      | \$244.00                         | \$708.75        | \$155.34               | \$155.34   | \$309.41                          |
| Single: Over 65  | \$0.00                        | \$217.38                         | \$217.38        | \$155.34               | \$0.00   | \$0.00                            |
| 2 Party: Retiree & Spouse Under 65   | \$929.50                      | \$488.00                         | \$1,417.50      | \$341.23               | \$341.23   | \$588.27                          |
| 2 Party: Retiree & Child(ren) Under 65   | \$929.50                      | \$488.00                         | \$1,417.50      | \$279.27               | \$279.27   | \$650.23                          |
| 2 Party: Retiree & Spouse Over 65  | \$0.00                        | \$434.76                         | \$434.76        | \$341.23               | \$0.00   | \$0.00                            |
| 2 Party: Retiree & Spouse 1 Under 65 & 1 Over 65   | \$438.13                      | \$488.00                         | \$926.13        | \$341.23               | \$341.23   | \$96.90                           |
| 2 Party: Retiree & Child(ren) 1 Over 65  | \$438.13                      | \$488.00                         | \$926.13        | \$279.27               | \$279.27   | \$158.86                          |
| Family: All Under 65   | \$1,638.25                    | \$488.00                         | \$2,126.25      | \$480.65               | \$480.65   | \$1,157.60                        |
| Family: 2 Over 65 + 1 or more Under 65   | \$655.51                      | \$488.00                         | \$1,143.51      | \$480.65               | \$480.65   | \$174.86                          |
| Family: 1 Over 65 + 2 or more Under 65   | \$1,146.88                    | \$488.00                         | \$1,634.88      | \$480.65               | \$480.65   | \$666.23                          |

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|---|-------------------------------|----------------------------------|-----------------|------------------------|--|-----------------------------------|
|   | (1)                           |                                  |                 | (2)                    | (3)  | (1) - (3)                         |
| <b>Blue Cross Blue Shield HMO of New Mexico (Medicare Only)</b>                 |                               |                                  |                 |                        |  |                                   |
| Single: Under 65  | NOT AVAILABLE                 |                                  |                 |                        |  |                                   |
| Single: Over 65   | \$0.00                        | \$230.20                         | \$230.20        | N/A                    | \$0.00   | \$0.00                            |
| 2 Party: Both Under 65  | NOT AVAILABLE                 |                                  |                 |                        |  |                                   |
| 2 Party: Both Over 65   | \$0.00                        | \$460.40                         | \$460.40        | N/A                    | \$0.00   | \$0.00                            |
| 2 Party: 1 Under 65 & 1 Over 65   | NOT AVAILABLE                 |                                  |                 |                        |  |                                   |
| Family: All Under 65  | NOT AVAILABLE                 |                                  |                 |                        |  |                                   |
| Family: 2 Over 65 + 1 or more Under 65  | NOT AVAILABLE                 |                                  |                 |                        |  |                                   |
| Family: 1 Over 65 + 2 or more Under 65  | NOT AVAILABLE                 |                                  |                 |                        |  |                                   |
| <b>Tricare Supplement (Selman &amp; Company) (Under 65) - Military Retirees</b> |                               |                                  |                 |                        |  |                                   |
| Single: Under 65  | \$0.00                        | \$67.50                          | \$67.50         | \$69.36                | \$0.00   | \$0.00                            |
| Single: Over 65   | NOT AVAILABLE                 |                                  |                 |                        |  |                                   |
| 2 Party: Both Under 65  | \$0.00                        | \$132.50                         | \$132.50        | \$134.36               | \$0.00   | \$0.00                            |
| 2 Party: Both Over 65   | NOT AVAILABLE                 |                                  |                 |                        |  |                                   |
| 2 Party: 1 Under 65 & 1 Over 65   | NOT AVAILABLE                 |                                  |                 |                        |  |                                   |
| Family: All Under 65  | \$0.00                        | \$178.50                         | \$178.50        | \$180.36               | \$0.00   | \$0.00                            |
| Family: 2 Over 65 + 1 or more Under 65  | NOT AVAILABLE                 |                                  |                 |                        |  |                                   |
| Family: 1 Over 65 + 2 or more Under 65  | NOT AVAILABLE                 |                                  |                 |                        |  |                                   |

Anthem Blue Cross Senior Secure HMO is only available in Southern California

\*DDB - Defined Dollar Benefit paid from Post-Retirement Hospital/Medical Plan

\*\*The Transition Period applies through July 31st following the retirement date