

2024

Monthly Rates for Legacy Raytheon Retiree Benefit Plans (ESY)



For participants in the following legacy plans:

- Raytheon Company Pension Plan for Salaried Employees
- Exhibit B: E-Systems, Inc. Salaried Employees Retirement Plan (ESY)

Notes:

- Rates shown reflect 100% of the cost for medical coverage and do not include any subsidy you may be eligible to receive from the company. See the applicable *Eligibility Summary* for an explanation of how your subsidy is calculated.
- If you cover a configuration of eligible dependents that is not listed in these charts, such as yourself and one or more dependent children, or your spouse and one or more dependent children, call the RTX Benefits Center at **1-800-243-8135** for rates for the applicable plan(s).

For those who are NOT Medicare eligible	MONTHLY PREMIUM	
	Retiree or Spouse	Retiree and Spouse
MEDICAL		
NATIONAL		
Anthem BCBS Silver with HSA*	\$868.00	\$1,736.00
CALIFORNIA; COLORADO; GEORGIA; PORTLAND, OREGON; WASHINGTON STATE AND MID-ATLANTIC STATES		
Kaiser Gold with HSA*	\$883.88	\$1,767.76
HAWAII		
Health Plan Hawaii Plus	\$820.70	\$1,969.70
Kaiser Permanente HMO (Hawaii)	\$1,262.10	\$2,524.20
NO NETWORK ACCESS (INSIDE THE UNITED STATES)**		
Anthem BCBS Out-of-Area Indemnity	\$1,425.70	\$2,851.40
Anthem BCBS Out-of-Area with HSA*	\$1,225.70	\$2,451.40
OUTSIDE THE UNITED STATES		
Anthem BCBS Out-of-Area Indemnity	\$1,425.70	\$2,851.40
RETIRED MILITARY		
TRICARE Supplement Plan***	\$67.50	\$132.50
VISION		
VSP Vision Plan	\$9.51	\$19.02
DENTAL (FOR ELIGIBLE RETIREES ONLY; SEE YOUR ELIGIBILITY SUMMARY)		
Delta Dental Plus	\$35.90	\$71.80

For those who ARE Medicare eligible	MONTHLY PREMIUM	
	Retiree or Spouse	Retiree and Spouse
MEDICAL		
NATIONAL		
Raytheon Medicare Plus Plan	\$105.00	\$210.00
CALIFORNIA		
Kaiser Senior Advantage (Northern CA)	\$261.74	\$523.48
Kaiser Senior Advantage (Southern CA)	\$261.74	\$523.48
UnitedHealthcare (UHC) Medicare Advantage (Northern CA)	\$475.32	\$950.64
UHC Medicare Advantage (Southern CA)	\$467.15	\$934.30
OUTSIDE THE UNITED STATES		
Anthem BCBS Out-of-Area Indemnity	\$1,425.70	\$2,851.40
DENTAL (FOR ELIGIBLE RETIREES ONLY; SEE YOUR ELIGIBILITY SUMMARY)		
Delta Dental Plus	\$35.90	\$71.80

*This is a health savings account (HSA)-eligible plan. While RTX's contributions to your HSA end when you retire, you may continue to make contributions (up to the applicable annual federal limit) for as long as you are enrolled in an HSA-eligible medical plan that is available to you as a retiree who is not Medicare-eligible. Once you enroll in Medicare, you are no longer eligible to make contributions to your HSA.

**Medical coverage is available through an Out-of-Area option only if you live in an area where a fully developed provider network is not available.

***If you or your spouse has retired from any of the U.S. armed forces with at least 20 years of service and receives health services through the U.S. Department of Veterans Affairs, the TRICARE Supplement Plan is available as a voluntary benefit to you and your spouse, if applicable. Note that the TRICARE Supplement Plan is not available to retirees who live in Colorado, Maine, New Hampshire, Utah or Washington.

While the company does not sponsor the TRICARE Supplement Plan, the company provides access to it for eligible retirees. For more information about the TRICARE Supplement Plan, contact Selman & Company ASI, the plan's administrator, at **1-800-638-2610**. To enroll in the TRICARE Supplement Plan, call the RTX Benefits Center at **1-800-243-8135**.

RTX reserves the right to amend, suspend or terminate its plans in whole or in part, in any way, at any time.

In the case of any inconsistency between this information and the official plan documents, the official plan documents always govern. Rates are subject to change. In addition, if rate or similar information is erroneous, you will still be charged the correct rate. If any such error is brought to the attention of the RTX Benefits Center, you will be provided with the correct information as soon as possible.

The complete details of the plans are contained in the plan documents, which include the *Eligibility Summary* that is applicable to your legacy retiree medical plan. These documents govern the rights and obligations of the participants and beneficiaries of the plans, and govern in the event of any questions or disputes involving the plans.

