WHEREAS currently there are six Medical Plan options for regular faculty and exempt professionals (including PacifiCare/UAnet, Kaiser, and Great West plans); and

WHEREAS before retirement, faculty build up a relationship with their providers and personal physicians, and on retirement are loath to change their established health care procedures and medications; and

WHEREAS for Medicare-eligible retirees, there are effectively only two available plans:

1. The Great West Medicare Eligible plans
2. Alternative Medical Payment (AMP); and

WHEREAS under the AMP, the retiree arranges his or her own Medical Plan (usually this means staying with the provider that has provided services during his or her years as a regular faculty member); and

WHEREAS currently the University contributions for Medicare-eligible faculty are:

1. Great West:
   - $303.75 (retiree)
   - $503.30 (retiree + spouse/SGDP*)
2. AMP (subject to income tax)
   - $139.75 (retiree)
   - $238.30 (retiree + spouse/SGDP*)

[*SGDP= Same Gender Domestic Partner]

THEREFORE, the Faculty Compensation and Benefits Committee moves:

That University contributions toward the cost of Medical Plans should be equitable across the board for all retirees. All Alternative Medical Plan recipients should receive the same University contributions as other regular and retired faculty.