



OFFICE OF GROUP BENEFITS

**OFFICIAL SCHEDULE OF MONTHLY PREMIUM RATES**

*Rates for Medicare Advantage plans effective January 1, 2024 (19% employer participation level)*

*For a complete list of rates at all participation levels please visit [info.groupbenefits.org](http://info.groupbenefits.org).*

Humana HMO Insured by Humana (Region 1)			Humana HMO Insured by Humana (Region 2)			Humana HMO Insured by Humana (Region 3)			Humana HMO Insured by Humana (Region 4)			Humana HMO Insured by Humana (Region 5)		
State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium

**RETIREE WITH 1 MEDICARE**

<b>ENROLLEE ONLY</b>	\$6.48	\$27.63	\$34.11	\$33.98	\$144.85	\$178.83	\$27.62	\$117.74	\$145.36	\$29.99	\$127.84	\$157.83	\$29.99	\$127.85	\$157.84
----------------------	--------	---------	---------	---------	----------	----------	---------	----------	----------	---------	----------	----------	---------	----------	----------

**RETIREE WITH 2 MEDICARE**

<b>ENROLLEE + 1 (SPOUSE)</b>	\$12.96	\$55.26	\$68.22	\$67.96	\$289.70	\$357.66	\$55.24	\$235.48	\$290.72	\$59.98	\$255.68	\$315.66	\$59.98	\$255.70	\$315.68
------------------------------	---------	---------	---------	---------	----------	----------	---------	----------	----------	---------	----------	----------	---------	----------	----------

Humana HMO Insured by Humana (Region 6)			Humana HMO Insured by Humana (Region 7)			Humana HMO Insured by Humana (Region 8)			Humana HMO Insured by Humana (Region 9)			Peoples Health HMO-POS Insured by Peoples Health (All Regions)		
State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium

**RETIREE WITH 1 MEDICARE**

<b>ENROLLEE ONLY</b>	\$39.52	\$168.49	\$208.01	\$42.58	\$181.50	\$224.08	\$40.63	\$173.23	\$213.86	\$38.75	\$165.20	\$203.95	\$30.40	\$129.60	\$160.00
----------------------	---------	----------	----------	---------	----------	----------	---------	----------	----------	---------	----------	----------	---------	----------	----------

**RETIREE WITH 2 MEDICARE**

<b>ENROLLEE + 1 (SPOUSE)</b>	\$79.04	\$336.98	\$416.02	\$85.15	\$363.01	\$448.16	\$81.27	\$346.45	\$427.72	\$77.50	\$330.40	\$407.90	\$60.80	\$259.20	\$320.00
------------------------------	---------	----------	----------	---------	----------	----------	---------	----------	----------	---------	----------	----------	---------	----------	----------

Region 1: Orleans, Saint Bernard, Plaquemines and Jefferson Parishes

Region 2: East Baton Rouge, West Baton Rouge, Livingston, Ascension, Iberville, Pointe Coupee, East Feliciana and West Feliciana Parishes

Region 3: Lafourche, Saint John, Saint Charles, Saint James, Assumption and Terrebonne Parishes

Region 4: Lafayette, Evangeline, Saint Landry, Acadia, Saint Martin, Iberia, Vermilion and Saint Mary Parishes

Region 5: Beauregard, Allen, Calcasieu, Jefferson Davis and Cameron Parishes

Region 6: Vernon, Sabine, Natchitoches, Winn, Grant, Rapides, LaSalle, Catahoula, Concordia and Avoyelles Parishes

Region 7: Caddo, Bossier, Webster, Claiborne, Bienville, Red River and DeSoto Parishes

Region 8: Ouachita, Union, Lincoln, Jackson, Caldwell, Richland, Morehouse, Franklin, West Carroll, East Carroll, Madison and Tensas Parishes

Region 9: Washington, Saint Tammany, Saint Helena and Tangipahoa Parishes

Approved



OFFICE OF GROUP BENEFITS

**OFFICIAL SCHEDULE OF MONTHLY PREMIUM RATES**

*Rates for Medicare Advantage plans effective January 1, 2024 (19% employer participation level)*

*For a complete list of rates at all participation levels please visit [info.groupbenefits.org](http://info.groupbenefits.org).*

	Blue Advantage HMO Insured by HMO Louisiana (Region 1)			Blue Advantage HMO Insured by HMO Louisiana (Region 2)			Blue Advantage HMO Insured by HMO Louisiana (Regions 3 & 4)			Blue Advantage HMO Insured by HMO Louisiana (Regions 5, 6, 7, & 8)			Blue Advantage HMO Insured by HMO Louisiana (Region 9)		
	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium
<b>RETIREE WITH 1 MEDICARE</b>															
<b>ENROLLEE ONLY</b>	\$33.06	\$140.94	\$174.00	\$41.23	\$175.77	\$217.00	\$37.43	\$159.57	\$197.00	\$43.13	\$183.87	\$227.00	\$40.28	\$171.72	\$212.00
<b>RETIREE WITH 2 MEDICARE</b>															
<b>ENROLLEE + 1 (SPOUSE)</b>	\$66.12	\$281.88	\$348.00	\$82.46	\$351.54	\$434.00	\$74.86	\$319.14	\$394.00	\$86.26	\$367.74	\$454.00	\$80.56	\$343.44	\$424.00

Region 1: Orleans, Saint Bernard, Plaquemines and Jefferson Parishes

Region 2: East Baton Rouge, West Baton Rouge, Livingston, Ascension, Iberville, Pointe Coupee, East Feliciana and West Feliciana Parishes

Region 3: Lafourche, Saint John, Saint Charles, Saint James, Assumption and Terrebonne Parishes

Region 4: Lafayette, Evangeline, Saint Landry, Acadia, Saint Martin, Iberia, Vermilion and Saint Mary Parishes

Region 5: Beauregard, Allen, Calcasieu, Jefferson Davis and Cameron Parishes

Region 6: Vernon, Sabine, Natchitoches, Winn, Grant, Rapides, LaSalle, Catahoula, Concordia and Avoyelles Parishes

Region 7: Caddo, Bossier, Webster, Claiborne, Bienville, Red River and DeSoto Parishes

Region 8: Ouachita, Union, Lincoln, Jackson, Caldwell, Richland, Morehouse, Franklin, West Carroll, East Carroll, Madison and Tensas Parishes

Region 9: Washington, Saint Tammany, Saint Helena and Tangipahoa Parishes

Approved