

2023 Medicare Premiums with Low-Income Subsidies

Contract	Plan	State	2023 Medical Premium	2023 Part D Premium	Plan Specific LIS Benchmark	Part D LIS Premium Subsidy	2023 Member Part D Premium					2023 Total Member Premium				
							LIS				No LIS	LIS				No LIS
							100%	75%	50%	25%		100%	75%	50%	25%	
SNPs - Minnesota																
H2458-002	Medica DUAL Solution (HMO SNP)	MN	\$ -	\$ 39.90	\$ 39.90	\$ 39.90	\$ -	\$ 10.00	\$ 20.00	\$ 29.90	\$ 39.90	\$ -	\$ 10.00	\$ 20.00	\$ 29.90	\$ 39.90
H9952-001	Medica AccessAbility Solution Enhanced (HMO SNP)	MN	\$ -	\$ 39.90	\$ 39.90	\$ 39.90	\$ -	\$ 10.00	\$ 20.00	\$ 29.90	\$ 39.90	\$ -	\$ 10.00	\$ 20.00	\$ 29.90	\$ 39.90
Prime Solution - Minnesota, Wisconsin, North Dakota & South Dakota																
H2450-001	Medica Prime Solution Basic w/Rx 2 (Cost)	MN	\$ 86.00	\$ 83.60	\$ 39.90	\$ 39.90	\$ 43.70	\$ 53.70	\$ 63.70	\$ 73.60	\$ 83.60	\$ 129.70	\$ 139.70	\$ 149.70	\$ 159.60	\$ 169.60
H2450-002	Medica Prime Solution Enhanced w/Rx 2 (Cost)	MN	\$ 166.00	\$ 76.30	\$ 39.90	\$ 39.90	\$ 36.40	\$ 46.40	\$ 56.40	\$ 66.30	\$ 76.30	\$ 202.40	\$ 212.40	\$ 222.40	\$ 232.30	\$ 242.30
H2450-007	Medica Prime Solution Thrift w/Rx (Cost)	All	\$ 40.00	\$ 50.30	\$ 41.50	\$ 41.50	\$ 8.80	\$ 19.20	\$ 29.60	\$ 39.90	\$ 50.30	\$ 48.80	\$ 59.20	\$ 69.60	\$ 79.90	\$ 90.30
H2450-016	Medica Prime Solution Basic w/Rx (Cost)	MN	\$ 86.00	\$ 45.80	\$ 39.90	\$ 29.00	\$ 16.80	\$ 24.00	\$ 31.30	\$ 38.50	\$ 45.80	\$ 102.80	\$ 110.00	\$ 117.30	\$ 124.50	\$ 131.80
H2450-035	Medica Prime Solution Core w/Rx (Cost)	ND, SD	\$ 86.00	\$ 63.10	\$ 39.90	\$ 39.90	\$ 23.20	\$ 33.20	\$ 43.20	\$ 53.10	\$ 63.10	\$ 109.20	\$ 119.20	\$ 129.20	\$ 139.10	\$ 149.10
H2450-037	Medica Prime Solution Premier w/Rx (Cost)	ND, SD	\$ 195.00	\$ 71.20	\$ 39.90	\$ 39.90	\$ 31.30	\$ 41.30	\$ 51.30	\$ 61.20	\$ 71.20	\$ 226.30	\$ 236.30	\$ 246.30	\$ 256.20	\$ 266.20
H2450-039	Medica Prime Solution Focus w/Rx (Cost)	WI	\$ 87.00	\$ 53.70	\$ 43.10	\$ 40.50	\$ 13.20	\$ 23.30	\$ 33.40	\$ 43.60	\$ 53.70	\$ 100.20	\$ 110.30	\$ 120.40	\$ 130.60	\$ 140.70
H2450-041	Medica Prime Solution Total w/Rx (Cost)	WI	\$ 194.00	\$ 64.70	\$ 43.10	\$ 43.10	\$ 21.60	\$ 32.40	\$ 43.10	\$ 53.90	\$ 64.70	\$ 215.60	\$ 226.40	\$ 237.10	\$ 247.90	\$ 258.70
H2450-049	Medica Prime Solution Standard w/Rx (Cost)	MN, SD	\$ -	\$ 49.40	\$ 39.90	\$ 34.00	\$ 15.40	\$ 23.90	\$ 32.40	\$ 40.90	\$ 49.40	\$ 15.40	\$ 23.90	\$ 32.40	\$ 40.90	\$ 49.40
H2450-801	Medica Prime Solution Group (Cost)	MN, WI	varies	\$ 32.70	\$ 37.00	\$ 32.70	\$ -	\$ 8.20	\$ 16.30	\$ 24.50	\$ 32.70	Vaires				
Advantage Solution - Minnesota, Nebraska & Iowa																
H6154-001	Medica Advantage Solution H6154-001 (HMO-POS)	MN	\$ -	\$ -	\$ 39.90	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
H6154-002	Medica Advantage Solution H6154-002 (HMO-POS)	MN	\$ -	\$ -	\$ 39.90	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
H8889-001	Medica Advantage Solution H8889-001 (PPO)	MN	\$ 54.70	\$ 30.30	\$ 39.90	\$ 30.30	\$ -	\$ 7.60	\$ 15.10	\$ 22.70	\$ 30.30	\$ 54.70	\$ 62.30	\$ 69.80	\$ 77.40	\$ 85.00
H8889-002	Medica Advantage Solution H8889-002 (PPO)	MN	\$ 63.70	\$ 31.30	\$ 39.90	\$ 31.30	\$ -	\$ 7.80	\$ 15.60	\$ 23.50	\$ 31.30	\$ 63.70	\$ 71.50	\$ 79.30	\$ 87.20	\$ 95.00
H8889-003	Medica Advantage Solution H8889-003 (PPO)	MN	\$ 150.40	\$ 45.60	\$ 39.90	\$ 39.90	\$ 5.70	\$ 15.70	\$ 25.70	\$ 35.60	\$ 45.60	\$ 156.10	\$ 166.10	\$ 176.10	\$ 186.00	\$ 196.00
H8889-004	Medica Advantage Solution H8889-004 (PPO)	MN	\$ 106.50	\$ 27.50	\$ 39.90	\$ 27.50	\$ -	\$ 6.90	\$ 13.70	\$ 20.60	\$ 27.50	\$ 106.50	\$ 113.40	\$ 120.20	\$ 127.10	\$ 134.00
H8889-005	Medica Advantage Solution H8889-005 (PPO)	MN	\$ -	\$ -	\$ 39.90	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
H8889-008	Medica Advantage Solution H8889-008 (PPO)	MN	\$ -	\$ 19.00	\$ 39.90	\$ 19.00	\$ -	\$ 4.70	\$ 9.50	\$ 14.20	\$ 19.00	\$ -	\$ 4.70	\$ 9.50	\$ 14.20	\$ 19.00
H8889-009	Medica Advantage Solution H8889-009 (PPO)	MN	\$ -	\$ -	\$ -	\$ -	MA ONLY, NO PART D				MA ONLY, NO PART D					
H0798-001	Medica Advantage Solution with CHI Health (HMO)	NE, IA	\$ -	\$ -	\$ 39.90	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
H3632-001	Medica Advantage Solution H3632-001 (PPO)	NE, IA	\$ -	\$ 16.00	\$ 39.90	\$ 16.00	\$ -	\$ 4.00	\$ 8.00	\$ 12.00	\$ 16.00	\$ -	\$ 4.00	\$ 8.00	\$ 12.00	\$ 16.00
H8889-801	Medica Advantage Solution Group (PPO)	MN	varies	\$ 32.70	\$ 39.90	\$ 32.70	\$ -	\$ 8.20	\$ 16.30	\$ 24.50	\$ 32.70	Vaires				

- Employer Group Part D premiums represent the Basic Part D Premium only. Supplemental Part D premiums vary by group.
 - Only plans with Part D coverage are included above, medical only plans are excluded.

2023 Rider Premiums

n/a Senior Dental
 \$35.00 Wisconsin Rider

Contract
 H2450-801
 H8889-801

2023 Subsidy Amounts for Employer Groups Members

100%	75%	50%	25%	No LIS
\$32.70	\$24.50	\$16.40	\$8.20	\$0.00
\$32.70	\$24.50	\$16.40	\$8.20	\$0.00

2023 Part D National Averages

\$34.71 National Average Monthly Bid Amount (NAMBA)
 \$32.74 Base Beneficiary Premium (BBP)