

2024 Medicare Premiums with Low-Income Subsidies

Contract	Plan	State	2024 Medical Premium	2024 Part D Premium	Plan Specific LIS Benchmark	Part D LIS Subsidy	LIS	No LIS	LIS	No LIS
							2024 Part D Mbr Premium	2024 Total Mbr Premium		
SNPs - Minnesota										
H2458-002	Medica DUAL Solution (HMO SNP)	MN	\$0.00	\$42.20	\$42.20	\$42.20	\$0.00	\$42.20	\$0.00	\$42.20
H9952-001	Medica AccessAbility Solution Enhanced (HMO SNP)	MN	\$0.00	\$42.20	\$42.20	\$42.20	\$0.00	\$42.20	\$0.00	\$42.20
Prime Solution - Minnesota, Wisconsin, North Dakota & South Dakota										
H2450-001	Medica Prime Solution Basic w/Rx 2 (Cost)	MN	\$95.00	\$77.40	\$42.20	\$42.20	\$35.20	\$77.40	\$130.20	\$172.40
H2450-002	Medica Prime Solution Enhanced w/Rx 2 (Cost)	MN	\$183.00	\$64.40	\$42.20	\$35.50	\$28.90	\$64.40	\$211.90	\$247.40
H2450-007	Medica Prime Solution Thrift w/Rx (Cost)	All	\$43.00	\$36.70	\$45.10	\$36.70	\$0.00	\$36.70	\$43.00	\$79.70
H2450-016	Medica Prime Solution Basic w/Rx (Cost)	MN	\$95.00	\$39.00	\$42.20	\$24.30	\$14.70	\$39.00	\$109.70	\$134.00
H2450-035	Medica Prime Solution Core w/Rx (Cost)	ND, SD	\$90.00	\$49.30	\$42.20	\$30.50	\$18.80	\$49.30	\$108.80	\$139.30
H2450-037	Medica Prime Solution Premier w/Rx (Cost)	ND, SD	\$205.00	\$59.70	\$42.20	\$32.90	\$26.80	\$59.70	\$231.80	\$264.70
H2450-039	Medica Prime Solution Focus w/Rx (Cost)	WI	\$99.00	\$42.80	\$48.10	\$31.90	\$10.90	\$42.80	\$109.90	\$141.80
H2450-041	Medica Prime Solution Total w/Rx (Cost)	WI	\$215.00	\$51.50	\$48.10	\$36.20	\$15.30	\$51.50	\$230.30	\$266.50
H2450-049	Medica Prime Solution Standard w/Rx (Cost)	MN, SD	\$0.00	\$49.30	\$42.20	\$18.30	\$31.00	\$49.30	\$31.00	\$49.30
H2450-801	Medica Prime Solution Group (Cost)	MN, WI	varies	\$34.70	\$43.90	\$34.70	\$0.00	\$34.70	Vaires	Vaires
Advantage Solution - Minnesota, Nebraska, Iowa, North Dakota & South Dakota										
H6154-001	Medica Advantage Solution H6154-001 (HMO-POS)	MN	\$0.00	\$0.00	\$42.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H8889-001	Medica Advantage Solution H8889-001 (PPO)	MN	\$75.00	\$10.00	\$42.20	\$10.00	\$0.00	\$10.00	\$75.00	\$85.00
H8889-002	Medica Advantage Solution H8889-002 (PPO)	MN	\$88.80	\$6.20	\$42.20	\$6.20	\$0.00	\$6.20	\$88.80	\$95.00
H8889-003	Medica Advantage Solution H8889-003 (PPO)	MN	\$172.50	\$22.50	\$42.20	\$22.50	\$0.00	\$22.50	\$172.50	\$195.00
H8889-004	Medica Advantage Solution H8889-004 (PPO)	MN	\$126.20	\$14.80	\$42.20	\$4.80	\$10.00	\$14.80	\$136.20	\$141.00
H8889-005	Medica Advantage Solution H8889-005 (PPO)	MN	\$0.00	\$0.00	\$42.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H8889-008	Medica Advantage Solution H8889-008 (PPO)	MN	\$25.20	\$7.80	\$42.20	\$7.80	\$0.00	\$7.80	\$25.20	\$33.00
H8889-010	Medica Advantage Value (PPO)	NE, IA	\$0.00	\$0.00	\$42.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H8889-011	Medica Advantage Preferred (PPO)	NE, IA	\$123.50	\$8.50	\$42.20	\$8.50	\$0.00	\$8.50	\$123.50	\$132.00
H8889-012	Medica Advantage Select (PPO)	ND/SD	\$52.20	\$13.80	\$42.20	\$13.80	\$0.00	\$13.80	\$52.20	\$66.00
H8889-013	Medica Advantage Preferred (PPO)	ND/SD	\$181.30	\$10.70	\$42.20	\$10.70	\$0.00	\$10.70	\$181.30	\$192.00
H8889-014	Medica Advantage Value (PPO)	ND/SD	\$0.00	\$0.00	\$42.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H8889-015	Medica Advantage Select (PPO)	NE, IA	\$11.60	\$14.40	\$42.20	\$14.40	\$0.00	\$14.40	\$11.60	\$26.00
H8889-801	Medica Advantage Solution Group (PPO)	MN	varies	\$34.70	\$42.20	\$34.70	\$0.00	\$34.70	Vaires	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.

2024 Rider Premiums

n/a Senior Dental
 \$39.00 Wisconsin Rider

2024 Part D National Averages

\$64.28 National Average Monthly Bid Amount (NAMBA)
 \$34.70 Base Beneficiary Premium (BBP)

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