

Medicare Primary Plans for 100% Contributory Medicare Primary Subscribers (COBRA)

Monthly Premium Rates January 1, 2024 – December 31, 2024	Humana		Base PPO Plan (70/30)	
	Group Medicare Advantage Plans		TOBACCO ATTESTATION COMPLETE?*	
	Base Plan	Enhanced Plan	YES	NO
MEDICARE PRIMARY FOR RETIREE AND ONE OR MORE DEPENDENTS				
Subscriber	\$4.00	\$73.00	\$660.81	\$720.81
Subscriber + Child(ren)	\$8.00	\$146.00	\$818.91	\$878.81
Subscriber + Spouse	\$8.00	\$146.00	\$1,094.31	\$1,154.31
Subscriber + Family	\$12.00	\$219.00	\$1,113.69	\$1,173.69
NON-MEDICARE PRIMARY FOR DEPENDENTS(S) - ENHANCED PPO PLAN (80/20)				
Subscriber + Child(ren)	\$259.00	\$328.00	\$920.91	\$980.91
Subscriber + Spouse	\$654.00	\$723.00	\$1,323.81	\$1,383.81
Subscriber + Family	\$674.00	\$743.00	\$1,344.21	\$1,404.21
NON-MEDICARE PRIMARY FOR DEPENDENTS(S) - BASE PPO PLAN (70/30)				
Subscriber + Child(ren)	\$222.00	\$291.00	\$883.17	\$943.17
Subscriber + Spouse	\$594.00	\$663.00	\$1,262.61	\$1,322.61
Subscriber + Family	\$602.00	\$671.00	\$1,270.77	\$1,330.77

Notes:

*Premium credit completed during enrollment period. COBRA only.