

ISP Medicare Eligible Retiree Premiums
*Effective January 1, 2020**

MAPD Premium

(Single or Both Members Enrolled in Medicare)

MONTHLY RATES - Medical/Rx Only

| Category | MAP Medical Premium | Rx Part D Premium | Combined Premium | HRA Contribution from ISP | Total Monthly Premium Due |
|-------------------------------------|---------------------|-------------------|------------------|---------------------------|---------------------------|
| Single Member Only | \$74.92 | \$127.15 | \$202.07 | (-\$74.92) | \$127.15 |
| Member +1 (Both on Medicare A&B) | \$149.84 | \$254.30 | \$404.14 | (-\$149.84) | \$254.30 |

MONTHLY RATES – Medical/Rx, Dental, Vision

| Category | MAP Medical Premium | Rx Part D Premium | ISP Plan Dental/Vision Premium | Combined Premium | HRA Contribution from ISP | Total Monthly Premium Due |
|-------------------------------------|---------------------|-------------------|--------------------------------|------------------|---------------------------|---------------------------|
| Single Member Only | \$74.92 | \$127.15 | \$27.78 | \$229.85 | (-\$74.92) | \$154.93 |
| Member +1 (Both on Medicare A&B) | \$149.84 | \$254.30 | \$57.97 | \$462.11 | (-\$149.84) | \$312.27 |

- All Members eligible for Medicare must enroll in Medicare A & B along with the Medicare Advantage Plan Part D (MAPD) as offered by the Indiana State Police.
- This requirement applies to all Members eligible for Medicare based on their own merit or through the eligibility of a spouse.
- Members who are eligible for Medicare but have not enrolled will have their claims processed as if Medicare is primary.

*These are the approved rates effective January 1, 2020. Rates are subject to change.

ISP Medicare Eligible Retiree Premiums
*Effective January 1, 2020**

MAPD and ISP Health Plan Premium
 (One or More Members Remaining in the ISP Health Plan)

MONTHLY RATES - Medical/Rx Only

| Category | MAP Medical Premium | Rx Part D Premium | ISP Health Plan Premium | Combined Premium | HRA Contribution from ISP | Total Monthly Premium Due |
|--|---------------------|-------------------|-------------------------|------------------|---------------------------|---------------------------|
| Member + Multiple (two Members on Medicare A&B) | \$149.84 | \$254.30 | \$23.04 | \$427.18 | (-\$149.84) | \$277.34 |
| Member +1 (only one on Medicare A&B) | \$74.92 | \$127.15 | \$266.91 | \$468.98 | (-\$74.92) | \$394.06 |
| Member + Multiple (only one on Medicare A&B) | \$74.92 | \$127.15 | \$307.87 | \$509.94 | (-\$74.92) | \$435.02 |

MONTHLY RATES – Medical/Rx, Dental, Vision

| Category | MAP Medical Premium | Rx Part D Premium | ISP Health Plan Premium | ISP Plan Dental/Vision Premium | Combined Premium | HRA Contribution from ISP | Total Monthly Premium Due |
|--|---------------------|-------------------|-------------------------|--------------------------------|------------------|---------------------------|---------------------------|
| Member + Multiple (two Members on Medicare A&B) | \$149.84 | \$254.30 | \$23.04 | \$58.12 | \$485.30 | (-\$149.84) | \$335.46 |
| Member +1 (only one on Medicare A&B) | \$74.92 | \$127.15 | \$266.91 | \$83.23 | \$552.21 | (-\$74.92) | \$477.29 |
| Member + Multiple (only one on Medicare A&B) | \$74.92 | \$127.15 | \$307.87 | \$134.53 | \$644.47 | (-\$74.92) | \$569.55 |

- All Members eligible for Medicare must enroll in Medicare A & B along with the Medicare Advantage Plan Part D (MAPD) as offered by the Indiana State Police.
- This requirement applies to all Members eligible for Medicare based on their own merit or through the eligibility of a spouse.
- Members who are eligible for Medicare but have not enrolled will have their claims processed as if Medicare is primary.

Questions Call:
 Human Resources Division
 317-232-8275
 1-800-622-4995

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