ISP Medicare Eligible Retiree Premiums

Effective January 1, 2024*

MAPD Premium

(Single or Both Members Enrolled in Medicare)

MONTHLY RATES - Medical/Rx Only

Category	MAP Medical	Rx Part D	Combined	HRA Contribution	Total Monthly
	Premium	Premium	Premium	from ISP	Premium Due
Single Member Only	\$32.81	\$119.81	\$152.62	(-\$32.81)	\$119.81
Member +1 (Both on Medicare A&B)	\$65.62	\$239.62	\$305.24	(-\$65.62)	\$239.62

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	\$32.81	\$119.81	\$27.78	\$180.40	(-\$32.81)	\$147.59
Member +1 (Both on Medicare A&B)	\$65.62	\$239.62	\$57.97	\$363.21	(-\$65.62)	\$297.59

- 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, 2024. Rates are subject to change.

ISP Medicare Eligible Retiree Premiums

Effective January 1, 2024*

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)	\$65.62	\$239.62	\$23.04	\$328.28	(-\$65.62)	\$262.66
Member +1 (only one on Medicare A&B)	\$32.81	\$119.81	\$266.91	\$419.53	(-\$32.81)	\$386.72
Member + Multiple (only one on Medicare A&B)	\$32.81	\$119.81	\$307.87	\$460.49	(-\$32.81)	\$427.68

MONTHLY RATES - Medical/Rx, Dental, Vision

	MAP Medical	Rx Part D	ISP Health	ISP Plan	Combined	HRA	Total
Category	Premium	Premium	Plan Premium	Dental/Vision	Premium	Contribution	Monthly
				Premium		from ISP	Premium Due
Member + Multiple	\$65.62	\$239.62	\$23.04	\$58.12	\$386.40	(-\$65.62)	\$320.78
(two Members on Medicare A&B)	\$03.02	\$239.02	\$23.04	\$30.12	\$380.40	(-\$05.02)	\$320.70
Member +1	\$32.81	\$119.81	\$266.91	\$83.23	\$502.76	(-\$32.81)	\$469.95
(only one on Medicare A&B)	\$32.81	\$119.81	\$200.91	\$83.23	\$302.70	(-\$32.81)	\$ 4 03.33
Member + Multiple	\$32.81	\$119.81	\$307.87	\$134.53	\$595.02	(-\$32.81)	\$562.21
(only one on Medicare A&B)	\$32.81	\$119.01	\$307.87	\$134.33	\$393.02	(-\$32.81)	\$302.21

- 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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