

**Premium 80-20 Rates for
2024 Retiree Medical Program**

2024	2024 Monthly Rates		2024 Annual Rates	
Total Monthly Rate	DePaul	Retiree	DePaul	Retiree

Blue Cross Blue Shield Medicare Advantage						
Per Medicare eligible individual	\$ 310.20	\$ 248.16	\$ 62.04	\$ 2,977.92	\$ 744.48	

Blue Cross Blue Shield PPO						
1 Medicare eligible	not eligible	N/A	N/A	N/A	N/A	N/A
2 Medicare eligible	not eligible	N/A	N/A	N/A	N/A	N/A
1 Medicare eligible and 1 non-Medicare eligible	not eligible	N/A	N/A	N/A	N/A	N/A
1 non-Medicare eligible	\$ 1,938.28	\$ 1,715.78	\$ 222.50	\$ 20,589.31	\$ 2,670.05	
2 non-Medicare eligible	\$ 3,876.50	\$ 3,375.87	\$ 500.63	\$ 40,510.42	\$ 6,007.58	
Family non-Medicare eligible	\$ 4,720.10	\$ 4,030.35	\$ 689.75	\$ 48,364.18	\$ 8,277.02	

HMO Illinois						
1 Medicare eligible	\$ 615.31	\$ 492.25	\$ 123.06	\$ 5,906.98	\$ 1,476.74	
2 Medicare eligible	\$ 1,230.62	\$ 984.50	\$ 246.12	\$ 11,813.95	\$ 2,953.49	
1 Medicare eligible and 1 non-Medicare eligible	\$ 1,754.52	\$ 1,403.62	\$ 350.90	\$ 16,843.39	\$ 4,210.85	
1 non-Medicare eligible	\$ 727.77	\$ 582.22	\$ 145.55	\$ 6,986.59	\$ 1,746.65	
2 non-Medicare eligible	\$ 1,866.98	\$ 1,493.58	\$ 373.40	\$ 17,923.01	\$ 4,480.75	
Family non-Medicare eligible	\$ 1,866.98	\$ 1,493.58	\$ 373.40	\$ 17,923.01	\$ 4,480.75	

Note: In addition to the DePaul medical premium, you will have to pay a premium to Medicare for Part B. Depending on your income level, you may also pay an Income Related Monthly Adjustment Amount (IRMAA). More information on the Part B premiums can be found on the Medicare website (<https://www.medicare.gov/your-medicare-costs/part-b-costs/part-b-costs.html>). Additionally, while you do not have to sign up for Medicare Part D separately, Part D is included in the Medicare Advantage plan. You may be required to pay a Part D income-related monthly adjustment amount (Part D-IRMAA). More information can be found on Medicare's website (<https://www.medicare.gov/your-medicare-costs/part-b-costs/part-b-costs.html>).