

ISP Medicare Eligible Retiree Premiums

Effective January 1, 2021*

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	\$59.73	\$124.82	\$184.55	(-\$59.73)	\$124.82
Member +1 (Both on Medicare A&B)	\$119.46	\$249.64	\$369.10	(-\$119.46)	\$249.64

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	\$59.73	\$124.82	\$27.78	\$212.33	(-\$59.73)	\$152.60
Member +1 (Both on Medicare A&B)	\$119.46	\$249.64	\$57.97	\$427.07	(-\$119.46)	\$307.61

- 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, 2021. Rates are subject to change.

ISP Medicare Eligible Retiree Premiums

*Effective January 1, 2021**

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)	\$119.46	\$249.64	\$23.04	\$392.14	(-\$119.46)	\$272.68
Member +1 (only one on Medicare A&B)	\$59.73	\$124.82	\$266.91	\$451.46	(-\$59.73)	\$391.73
Member + Multiple (only one on Medicare A&B)	\$59.73	\$124.82	\$307.87	\$492.42	(-\$59.73)	\$432.69

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)	\$119.46	\$249.64	\$23.04	\$58.12	\$450.26	(-\$119.46)	\$330.80
Member +1 (only one on Medicare A&B)	\$59.73	\$124.82	\$266.91	\$83.23	\$534.69	(-\$59.73)	\$474.96
Member + Multiple (only one on Medicare A&B)	\$59.73	\$124.82	\$307.87	\$134.53	\$626.95	(-\$59.73)	\$567.22

- 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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