

RETIREE RATES FOR HEALTH CARE COVERAGE

These rates are effective January 1, 2024 through December 31, 2024:

CHP/FL BLUE - RETIREE			
Coverage	2024	2023	Difference
Individual	669.50	622.32	47.18
2 Party	1,390.49	1,295.15	95.34
Family	1,877.60	1,747.92	129.68

CHP MEDICARE ADVANTAGE PLAN			
Coverage	2024	2023	Difference
Individual (Medicare)	206.40	198.15	8.25
2 Party (Both Medicare)	416.58	400.08	16.50
2 Party (One Medicare)	856.84	814.75	42.09
Family (Medicare)	1,417.74	1,346.90	70.84

FL BLUE MEDICARE ADVANTAGE PLAN – POST 65			
Coverage	2024	2024	Difference
Individual (Medicare)	245.55	225.60	19.95
2 Party (Both Medicare)	494.88	454.98	39.90
2 Party (One Medicare)	961.73	893.62	68.11
Family (One Medicare)	1,460.93	1,358.48	102.45
Family (Both Medicare) + 1 Dep	1,129.62	1,041.66	87.96
Family (Both Medicare) + 2/More Dep	1,744.24	1,621.84	122.40