

## Premium Information

We at Blue Cross and Blue Shield of Louisiana can raise your premium only if we raise the premium for all policies like yours in this state. Your premium will change as you enter a new age bracket or move to a new area. Our age brackets and areas are defined on the chart below. Premiums may be paid on a monthly, quarterly, semi-annual or annual basis. Monthly premiums are shown below.

### Monthly Premiums Effective 5-1-2023

#### Area I (All parishes in the state except the Area II parishes listed below)

Age	BC 65 Plan A	BC 65 Plan B	BC 65 SELECT Plan B	BC 65 Plan F	BC 65 SELECT Plan F	BC 65 Plan G	BC 65 SELECT Plan G	BC 65 PLUS Plan G	BC 65 SELECT PLUS Plan G	BC 65 Plan N	BC 65 SELECT Plan N
Under 65	374.50	500.20	343.10	989.30	435.30	643.90	346.90	666.90	369.90	331.20	235.20
65	130.30	169.60	116.90	199.70	148.50	128.50	95.60	151.50	118.60	97.00	72.20
66-68	141.10	184.40	126.80	217.10	161.60	139.70	103.90	162.70	126.90	105.50	78.50
69-71	152.90	201.10	138.30	236.70	176.40	152.30	113.40	175.30	136.40	115.00	85.80
72-74	161.80	213.40	146.80	251.40	187.50	161.80	120.60	184.80	143.60	122.10	91.10
75-77	171.90	228.30	157.30	270.30	201.60	174.00	129.60	197.00	152.60	131.60	98.00
78-80	179.20	238.90	164.20	282.90	210.50	182.10	135.50	205.10	158.50	137.70	102.40
81+	186.80	249.20	171.20	294.80	216.60	189.70	139.40	212.70	162.40	143.50	105.20

#### Area II (Orleans, Jefferson, Plaquemines, St. Bernard, St. Charles, St. Tammany and Washington Parishes)

Age	BC 65 Plan A	BC 65 Plan B	BC 65 SELECT Plan B	BC 65 Plan F	BC 65 SELECT Plan F	BC 65 Plan G	BC 65 SELECT Plan G	BC 65 PLUS PLAN G	BC 65 SELECT PLUS Plan G	BC 65 Plan N	BC 65 SELECT Plan N
Under 65	432.70	577.90	396.30	1,143.20	503.10	744.20	400.60	767.20	423.60	382.90	271.70
65	150.70	196.20	134.80	230.70	171.80	148.40	110.40	171.40	133.40	112.10	83.60
66-68	162.90	213.10	146.70	251.00	186.70	161.40	120.10	184.40	143.10	122.00	90.70
69-71	176.60	232.00	159.60	273.70	203.80	176.00	131.10	199.00	154.10	133.00	99.10
72-74	186.90	246.20	169.60	290.30	216.60	186.70	139.40	209.70	162.40	141.10	105.20
75-77	198.30	264.20	181.90	312.00	232.90	200.70	149.80	223.70	172.80	151.70	113.10
78-80	207.10	275.70	189.70	326.60	243.00	210.10	156.30	233.10	179.30	158.90	118.00
81+	215.40	287.80	197.80	341.20	249.90	219.40	160.90	242.40	183.90	165.90	121.60

**BlueChoice 65, BlueChoice 65 SELECT, BlueChoice 65 PLUS and BlueChoice 65 SELECT PLUS** are not connected with or endorsed by the U.S. government or the federal Medicare program.