

Mountain Health Co-op
Individual Modernized Medicare Supplement
Monthly Attained Age Premium Rates

MONTANA
Rates Effective 5/1/2026

Attained Age	Female Non-Tobacco					Female Tobacco				
	Plan A	Plan F	Plan G	Plan HDG	Plan N	Plan A	Plan F	Plan G	Plan HDG	Plan N
<65	619.48	857.32	849.34	256.45	535.94	619.48	857.32	849.34	294.77	535.94
65	175.59	261.12	204.02	56.99	134.78	201.93	300.28	234.63	65.50	154.99
66	175.59	261.12	204.02	58.93	134.78	201.93	300.28	234.63	67.74	154.99
67	175.59	262.27	204.02	60.84	135.36	201.93	301.61	234.63	69.93	155.66
68	183.07	265.48	204.02	62.70	138.30	210.53	305.31	234.63	72.07	159.05
69	190.41	273.82	221.20	64.50	143.22	218.97	314.89	254.37	74.13	164.70
70	197.52	283.92	229.79	66.99	154.31	227.15	326.51	264.26	76.99	177.46
71	203.42	293.62	237.99	69.33	160.89	233.94	337.67	273.69	79.69	185.02
72	209.33	302.76	246.20	71.67	167.14	240.73	348.17	283.13	82.38	192.21
73	215.23	311.90	254.40	74.01	173.70	247.52	358.68	292.56	85.07	199.76
74	221.14	321.04	262.60	76.35	180.27	254.31	369.19	301.99	87.76	207.31
75	227.05	330.17	270.95	78.69	186.84	261.10	379.70	311.59	90.45	214.87
76	230.03	336.56	276.82	80.29	191.77	264.54	387.05	318.34	92.29	220.53
77	233.02	342.95	282.62	81.89	196.69	267.97	394.40	325.01	94.13	226.20
78	236.01	349.34	288.42	83.49	201.62	271.41	401.74	331.69	95.97	231.86
79	238.99	355.73	294.17	85.09	206.54	274.84	409.09	338.29	97.81	237.52
80	241.98	362.12	299.91	86.69	211.47	278.28	416.44	344.90	99.64	243.19
81	244.05	368.38	305.54	88.56	216.31	280.66	423.63	351.37	101.79	248.75
82	246.12	374.64	311.16	90.42	221.14	283.04	430.83	357.84	103.93	254.31
83	248.19	380.89	316.82	92.29	225.98	285.42	438.03	364.35	106.08	259.88
84	250.27	387.15	322.45	94.15	230.82	287.81	445.22	370.82	108.22	265.44
85	252.34	393.41	328.31	96.02	235.65	290.19	452.42	377.55	110.37	271.01
86	253.39	397.93	332.60	97.53	239.25	291.39	457.62	382.50	112.10	275.13
87	254.43	402.45	336.95	99.04	242.83	292.60	462.81	387.49	113.84	279.26
88	255.48	406.97	341.32	100.55	246.42	293.81	468.01	392.52	115.58	283.38
89	256.53	411.49	345.71	102.06	250.01	295.01	473.21	397.57	117.31	287.51
90	257.58	416.01	350.11	103.57	253.60	296.22	478.41	402.62	119.05	291.64
91	257.83	419.57	353.64	104.89	256.44	296.51	482.50	406.69	120.56	294.91
92	258.08	423.12	357.18	106.20	259.28	296.79	486.59	410.76	122.07	298.17
93	258.33	426.68	360.73	107.52	262.12	297.08	490.69	414.84	123.58	301.44
94	258.58	430.24	364.28	108.83	264.96	297.37	494.78	418.92	125.09	304.71
95	258.83	433.80	367.84	110.15	267.80	297.66	498.87	423.01	126.60	307.97
96	261.68	438.57	372.22	110.15	270.75	300.93	504.36	428.05	126.60	311.36
97	264.56	443.40	376.65	110.15	273.73	304.24	509.91	433.15	126.60	314.78
98	267.47	448.27	381.14	110.15	276.74	307.59	515.52	438.31	126.60	318.25
99	270.41	453.21	385.68	110.15	279.78	310.97	521.19	443.53	126.60	321.75

One-time policy fee of \$25 not included in rates shown above.
Household discount of 7% for those eligible.

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MONTANA
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Attained Age	Male Non-Tobacco					Male Tobacco				
	Plan A	Plan F	Plan G	Plan HDG	Plan N	Plan A	Plan F	Plan G	Plan HDG	Plan N
<65	619.48	857.32	849.34	293.75	535.94	619.48	857.32	849.34	337.65	535.94
65	191.90	285.37	222.97	65.28	147.30	220.69	328.18	256.42	75.03	169.39
66	191.90	285.37	222.97	67.51	147.30	220.69	328.18	256.42	77.59	169.39
67	191.90	286.63	222.97	69.69	147.93	220.69	329.62	256.42	80.10	170.12
68	200.07	290.15	222.97	71.82	151.15	230.08	333.67	256.42	82.55	173.82
69	208.10	299.26	241.75	73.88	156.52	239.31	344.15	278.01	84.92	180.00
70	215.87	310.29	251.14	76.73	168.64	248.25	356.84	288.81	88.20	193.94
71	222.32	320.90	260.10	79.41	175.83	255.67	369.04	299.12	91.28	202.21
72	228.78	330.89	269.07	82.09	182.66	263.09	380.52	309.43	94.36	210.06
73	235.23	340.87	278.03	84.78	189.84	270.51	392.00	319.74	97.44	218.32
74	241.68	350.86	287.00	87.46	197.02	277.94	403.49	330.05	100.53	226.57
75	248.14	360.84	296.12	90.14	204.20	285.36	414.97	340.53	103.61	234.83
76	251.40	367.83	302.54	91.97	209.58	289.11	423.00	347.92	105.72	241.02
77	254.67	374.81	308.87	93.80	214.96	292.87	431.03	355.21	107.82	247.21
78	257.93	381.79	315.22	95.64	220.35	296.62	439.06	362.50	109.93	253.40
79	261.20	388.78	321.49	97.47	225.73	300.38	447.09	369.72	112.03	259.59
80	264.46	395.76	327.77	99.30	231.11	304.13	455.12	376.94	114.14	265.78
81	266.72	402.60	333.92	101.44	236.40	306.73	462.99	384.01	116.60	271.86
82	268.99	409.44	340.07	103.58	241.68	309.34	470.85	391.08	119.05	277.94
83	271.25	416.28	346.25	105.71	246.97	311.94	478.72	398.19	121.51	284.02
84	273.51	423.11	352.40	107.85	252.26	314.54	486.58	405.27	123.96	290.10
85	275.78	429.95	358.80	109.99	257.55	317.15	494.45	412.63	126.42	296.18
86	276.93	434.89	363.50	111.72	261.47	318.46	500.13	418.03	128.41	300.69
87	278.07	439.83	368.25	113.45	265.39	319.78	505.81	423.48	130.40	305.20
88	279.22	444.77	373.03	115.18	269.31	321.10	511.49	428.99	132.39	309.71
89	280.36	449.71	377.82	116.91	273.24	322.42	517.17	434.50	134.38	314.22
90	281.51	454.65	382.63	118.64	277.16	323.74	522.85	440.02	136.37	318.73
91	281.78	458.54	386.49	120.15	280.26	324.05	527.32	444.47	138.10	322.30
92	282.06	462.43	390.36	121.65	283.37	324.37	531.80	448.92	139.83	325.87
93	282.33	466.32	394.24	123.16	286.47	324.68	536.27	453.37	141.56	329.44
94	282.60	470.21	398.12	124.66	289.57	324.99	540.74	457.84	143.29	333.01
95	282.88	474.10	402.01	126.17	292.68	325.31	545.22	462.31	145.02	336.58
96	285.99	479.32	406.80	126.17	295.90	328.88	551.22	467.82	145.02	340.28
97	289.13	484.59	411.64	126.17	299.15	332.50	557.28	473.39	145.02	344.03
98	292.31	489.92	416.54	126.17	302.44	336.16	563.41	479.03	145.02	347.81
99	295.53	495.31	421.51	126.17	305.77	339.86	569.61	484.73	145.02	351.64

One-time policy fee of \$25 not included in rates shown above.
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