## Montana Health Cooperative Individual Modernized Medicare Supplement

**Monthly Rates with Area Factor Applied** 

## Idaho

For policies with effective dates on or after 3/1/2022

| Non-Tobacco |        |        |        |                  | Tobacco |        |        |        |
|-------------|--------|--------|--------|------------------|---------|--------|--------|--------|
|             |        |        |        |                  |         |        |        |        |
| Plan A      | Plan F | Plan G | Plan N |                  | Plan A  | Plan F | Plan G | Plan N |
| 268.91      | 316.19 | 268.77 | 206.26 | Ages <65 Monthly | 309.24  | 363.62 | 309.09 | 237.20 |
| 179.27      | 210.79 | 179.18 | 137.51 | Ages 65+ Monthly | 206.16  | 242.41 | 206.06 | 158.13 |

## **Modal Factors:**

| Annually     | 12 |  |
|--------------|----|--|
| Semiannually | 6  |  |
| Quarterly    | 3  |  |