Mountain Health CO-OP
Individual Modernized Medicare Supplement
Monthly Attained Age Premium Rates

WYOMING

Effective 7/1/2025

	Female Non-Tobacco					Female Tobacco				
Attained Age	Plan A	Plan F	Plan G	Plan HDG	Plan N	Plan A	Plan F	Plan G	Plan HDG	Plan N
65	176.77	187.77	157.81	37.60	95.51	203.28	215.94	181.48	43.22	109.84
66	176.77	187.77	157.81	38.89	95.51	203.28	215.94	181.48	44.70	109.84
67	176.77	187.77	157.81	40.15	95.51	203.28	215.94	181.48	46.14	109.84
68	176.77	187.77	157.81	41.37	95.51	203.28	215.94	181.48	47.55	109.84
69	182.94	193.06	163.97	42.56	98.69	210.38	222.02	188.56	48.92	113.49
70	189.39	199.77	170.67	44.51	101.93	217.80	229.74	196.28	51.16	117.22
71	195.05	206.14	177.26	46.30	106.29	224.31	237.06	203.85	53.22	122.23
72	200.71	212.51	184.06	48.10	110.87	230.82	244.39	211.67	55.29	127.50
73	206.37	221.07	192.06	49.92	115.72	237.33	254.23	220.87	57.38	133.07
74	214.15	230.91	200.60	51.76	120.61	246.27	265.55	230.69	59.49	138.69
75	223.16	241.01	209.93	53.61	125.91	256.64	277.16	241.42	61.62	144.80
76	230.62	250.51	218.60	55.25	130.55	265.21	288.08	251.39	63.50	150.13
77	238.52	260.55	227.98	56.91	135.93	274.29	299.63	262.17	65.42	156.32
78	246.88	271.17	237.89	58.60	142.14	283.91	311.84	273.58	67.36	163.46
79	256.00	282.68	248.39	60.33	148.69	294.40	325.08	285.64	69.34	171.00
80	265.68	294.87	259.50	62.07	155.61	305.53	339.11	298.43	71.35	178.95
81	274.91	307.67	271.15	64.04	162.83	316.15	353.82	311.82	73.61	187.26
82	284.72	321.24	283.50	66.05	170.47	327.43	369.42	326.03	75.92	196.04
83	295.15	335.64	296.61	68.08	178.73	339.43	385.99	341.11	78.26	205.54
84	306.24	350.95	310.54	70.15	187.86	352.18	403.59	357.12	80.64	216.04
85	318.03	367.21	325.34	72.26	197.55	365.74	422.29	374.14	83.06	227.18
86	329.25	382.85	339.50	74.13	206.68	378.64	440.27	390.42	85.21	237.69
87	341.19	399.49	354.56	76.03	216.41	392.37	459.42	407.74	87.39	248.87
88	353.90	417.21	370.60	77.96	226.76	406.98	479.79	426.19	89.61	260.77
89	367.43	436.09	387.69	79.93	237.79	422.54	501.50	445.84	91.87	273.45
90	379.99	454.01	403.94	81.92	248.34	436.99	522.10	464.53	94.16	285.59
91	391.01	470.61	418.96	82.96	258.06	449.66	541.20	481.81	95.36	296.76
92	402.34	487.78	434.52	84.00	268.12	462.69	560.95	499.70	96.55	308.34
93	412.39	503.58	448.86	85.04	277.46	474.25	579.11	516.19	97.75	319.08
94	422.28	519.35	463.19	86.08	286.82	485.62	597.25	532.66	98.94	329.84
95	431.99	535.05	477.47	87.12	296.17	496.78	615.31	549.09	100.14	340.60
96	441.06	546.29	487.50	87.12	302.39	507.21	628.23	560.62	100.14	347.75
97	449.88	557.21	497.25	87.12	308.44	517.36	640.79	571.83	100.14	354.71
98	458.43	567.80	506.69	87.12	314.30	527.19	652.97	582.70	100.14	361.45
99	466.68	578.02	515.81	87.12	319.96	536.68	664.72	593.18	100.14	367.95

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

Mountain Health CO-OP
Individual Modernized Medicare Supplement
Monthly Attained Age Premium Rates

WYOMING

Effective 7/1/2025

	Male Non-Tobacco					Male Tobacco				
Attained Age	Plan A	Plan F	Plan G	Plan HDG	Plan N	Plan A	Plan F	Plan G	Plan HDG	Plan N
65	200.63	213.13	179.11	43.07	108.40	230.73	245.09	205.98	49.51	124.66
66	200.63	213.13	179.11	44.54	108.40	230.73	245.09	205.98	51.20	124.66
67	200.63	213.13	179.11	45.99	108.40	230.73	245.09	205.98	52.86	124.66
68	200.63	213.13	179.11	47.39	108.40	230.73	245.09	205.98	54.47	124.66
69	207.64	219.12	186.10	48.75	112.01	238.78	251.99	214.02	56.03	128.82
70	214.96	226.74	193.72	50.99	115.69	247.20	260.75	222.77	58.61	133.05
71	221.38	233.97	201.19	53.03	120.64	254.59	269.06	231.37	60.96	138.73
72	227.81	241.20	208.91	55.10	125.84	261.98	277.38	240.25	63.33	144.72
73	234.23	250.91	217.99	57.18	131.34	269.36	288.55	250.69	65.73	151.04
74	243.06	262.09	227.68	59.29	136.89	279.52	301.40	261.83	68.15	157.42
75	253.29	273.54	238.27	61.41	142.91	291.29	314.57	274.01	70.59	164.35
76	261.75	284.33	248.11	63.29	148.17	301.01	326.97	285.33	72.74	170.40
77	270.71	295.72	258.75	65.19	154.28	311.32	340.08	297.57	74.93	177.42
78	280.21	307.78	270.01	67.13	161.33	322.24	353.94	310.51	77.16	185.53
79	290.56	320.84	281.92	69.10	168.77	334.15	368.97	324.21	79.43	194.08
80	301.54	334.68	294.53	71.10	176.62	346.77	384.88	338.71	81.73	203.11
81	312.02	349.20	307.75	73.36	184.82	358.83	401.58	353.92	84.32	212.54
82	323.16	364.60	321.77	75.65	193.49	371.64	419.29	370.04	86.96	222.51
83	335.00	380.96	336.66	77.99	202.86	385.25	438.10	387.16	89.64	233.29
84	347.58	398.32	352.46	80.36	213.22	399.72	458.07	405.33	92.37	245.20
85	360.97	416.78	369.26	82.77	224.22	415.11	479.30	424.65	95.14	257.85
86	373.70	434.53	385.33	84.91	234.59	429.76	499.71	443.13	97.60	269.78
87	387.25	453.42	402.43	87.09	245.62	445.34	521.44	462.79	100.10	282.46
88	401.67	473.54	420.63	89.31	257.37	461.92	544.57	483.72	102.65	295.97
89	417.03	494.96	440.02	91.55	269.89	479.59	569.21	506.03	105.23	310.37
90	431.29	515.29	458.47	93.84	281.86	495.99	592.59	527.24	107.86	324.14
91	443.79	534.14	475.53	95.03	292.89	510.36	614.26	546.85	109.23	336.83
92	456.66	553.63	493.18	96.22	304.32	525.16	636.67	567.15	110.60	349.96
93	468.07	571.56	509.45	97.41	314.92	538.28	657.30	585.87	111.97	362.16
94	479.29	589.46	525.72	98.60	325.54	551.18	677.88	604.57	113.34	374.37
95	490.30	607.28	541.93	99.79	336.16	563.85	698.37	623.21	114.70	386.58
96	500.60	620.04	553.31	99.79	343.22	575.69	713.04	636.30	114.70	394.70
97	510.61	632.44	564.37	99.79	350.08	587.20	727.30	649.03	114.70	402.59
98	520.31	644.45	575.09	99.79	356.73	598.36	741.12	661.36	114.70	410.24
99	529.68	656.05	585.45	99.79	363.15	609.13	754.46	673.26	114.70	417.62

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