Rate and Subsidy Charts
Rates for 2023-2024 LADWP & IBEW Local 18-Sponsored Health Plans

Rates are effective July 1, 2023 through June 30, 2024.

For Kaiser, UnitedHealthcare (UHC), Health Plan of Nevada (HPN) and Anthem Blue Cross retiree plans. Retirees must be enrolled in Anthem Blue Cross prior to retirement to participate in the plan. If as a retiree you cancelled your IBEW Local 18-sponsored medical plan, you are now able to re-enroll into an IBEW local 18-sponsored plan.

Coverage Level	United Healthcare Medicare Advantage PPO Option A	United Healthcare Medicare Advantage PPO Option B	United Healthcare Medicare Advantage PPO Option C	Kaiser/ Senior Advantage	United Healthcare Medicare Advantage HMO	HPN¹/UHC Medicare Advantage HMO²	Anthem Blue Cross HMO (Local 18) ³	Anthem Blue Cross PPO (Local 18) ³	Anthem Blue Cross Owens Valley (Local 18) ³
Retiree Under Age 65									
Self Only	\$1,647.10	\$1,429.51	\$1,112.61	\$948.38	\$1,992.08	\$1,461.25	\$1,738.22	\$1,950.27	\$2,048.07
Self + 1 dependent under 65	\$3,294.30	\$2,859.09	\$2,225.24	\$1,896.76	\$4,110.98	\$2,928.11	\$2,037.43	\$2,273.39	\$4,288.77
Self + 2 or more dependents under 65	\$4,314.36	\$3,744.41	\$2,914.30	\$2,683.92	\$4,510.05	\$4,091.43	\$2,231.12	\$2,823.67	\$5,323.96
Self + 1 dependent with Medicare Parts A & B	\$2,079.23	\$1,790.81	\$1,330.28	\$1,231.44	\$2,390.30	\$1,700.61	\$2,037.43	\$2,273.39	\$4,288.77
Self + 1 dependent with Medicare Part B	\$2,443.70	\$2,089.49	\$1,544.76	\$1,543.44	\$3,694.77	\$2,928.11	\$2,037.43	\$2,273.39	\$4,288.77
Retiree Over Age 65 and Enrolled in Medicare Parts A & B									
Self Only	\$432.13	\$361.30	\$217.67	\$283.06	\$398.22	\$233.75	\$1,139.08	\$1,766.94	N/A
Self + 1 dependent under 65	\$2,079.23	\$1,790.81	\$1,330.28	\$1,231.44	\$2,390.30	\$1,700.61	\$1,802.05	\$2,079.22	N/A
Self + 2 or more dependents under 65	\$3,099.39	\$2,676.20	\$2,019.36	\$2,018.60	\$2,916.19	\$2,863.93	\$2,252.24	\$2,647.08	N/A
Self + 1 dependent with Medicare Parts A & B	\$864.26	\$722.60	\$435.34	\$566.12	\$796.44	\$467.50	\$1,778.47	\$2,079.22	N/A
Self + 1 dependent with Medicare Part B	\$1,228.73	\$1,021.28	\$649.82	\$878.12	\$2,100.91	\$1,700.61	Self + 1 dependent with Medicare Parts A & B + 1 or more dependent(s) under 6		N/A
							\$2,230.00	\$2,647.08	
Retiree Over Age 65 and Enrolled in Medicare Part B Only									
Self Only	\$796.60	\$659.98	\$432.15	\$595.06	\$1,702.69	\$1,461.25	N/A	N/A	N/A
Self + 1 dependent under 65	\$2,443.70	\$2,089.49	\$1,544.76	\$1,543.44	\$3,694.61	\$2,928.11	N/A	N/A	N/A
Self + 2 or more dependents under 65	\$3,463.86	\$2,974.88	\$2,233.84	\$2,330.60	\$4,220.57	\$4,091.43	N/A	N/A	N/A
Self + 1 dependent with Medicare Parts A & B	\$1,228.73	\$1,021.28	\$649.82	\$878.12	\$2,100.91	\$1,700.61	N/A	N/A	N/A
Self + 1 dependent with Medicare Part B	\$1,593.20	\$1,319.96	\$864.30	\$1,190.12	\$3,405.38	\$2,928.11	N/A	N/A	N/A

¹ For retirees who are under age 65 or who are age 65 or over with Medicare Part B only and reside in Nevada.

² For retirees age 65 or over with Medicare Parts A and B and reside in Nevada.

³ Retirees must be enrolled in Anthem Blue Cross prior to retirement to participate in the plan. If as a retiree you cancelled your IBEW Local 18-sponsored medical plan, you are now able to re-enroll into an IBEW local 18-sponsored plan