

Rate and Subsidy Charts

Rates for 2024-2025 LADWP & IBEW Local 18-Sponsored Health Plans¹

Rates are effective July 1, 2024 through June 30, 2025.¹

For Kaiser Permanente, 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 Permanente Perm/Senior Advantage	United Healthcare Medicare Advantage HMO	HPN ² /UHC Medicare Advantage HMO ³	Anthem Blue Cross HMO (Local 18) ⁴	Anthem Blue Cross PPO (Local 18) ⁴	Anthem Blue Cross Owens Valley (Local 18) ⁴
Retiree Under Age 65									
Self Only	\$1,777.22	\$1,542.44	\$1,200.51	\$1,182.44	\$2,247.07	\$1,461.25	\$1,900.28	\$2,131.08	\$2,237.53
Self + 1 dependent under 65	\$3,554.55	\$3,084.96	\$2,401.03	\$2,364.88	\$4,637.19	\$2,928.11	\$2,224.57	\$2,481.39	\$4,674.93
Self + 2 or more dependents under 65	\$4,655.19	\$4,040.22	\$3,144.53	\$3,346.32	\$5,087.34	\$4,091.43	\$2,457.36	\$3,077.99	\$5,799.31
Self + 1 dependent with Medicare Parts A & B	\$2,259.35	\$1,953.74	\$1,468.18	\$1,498.76	\$2,695.29	\$1,700.61	\$2,224.57	\$2,481.39	\$4,674.93
Self + 1 dependent with Medicare Part B	\$2,623.82	\$2,252.42	\$1,682.66	\$1,810.76	\$4,167.70	\$2,928.11	\$2,224.57	\$2,481.39	\$4,674.93
Retiree Over Age 65 and Enrolled in Medicare Parts A & B									
Self Only	\$482.13	\$411.30	\$267.67	\$316.32	\$448.22	\$233.75	\$1,248.09	\$1,931.45	N/A
Self + 1 dependent under 65	\$2,259.35	\$1,953.74	\$1,468.18	\$1,498.76	\$2,695.29	\$1,700.61	\$1,968.30	\$2,269.97	N/A
Self + 2 or more dependents under 65	\$3,360.10	\$2,909.08	\$2,211.69	\$2,480.20	\$3,288.49	\$2,863.93	\$2,455.96	\$2,885.70	N/A
Self + 1 dependent with Medicare Parts A & B	\$964.26	\$822.60	\$535.34	\$632.64	\$896.44	\$467.50	\$1,942.63	\$2,269.97	N/A
Self + 1 dependent with Medicare Part B	\$1,328.73	\$1,121.28	\$749.82	\$944.64	\$2,368.85	\$1,700.61	Self + 1 dependent with Medicare Parts A & B + 1 or more dependent(s) under 65. \$2,431.75	\$2,885.70	N/A
Retiree Over Age 65 and Enrolled in Medicare Part B Only									
Self Only	\$846.60	\$709.98	\$482.15	\$628.32	\$1,920.63	\$1,461.25	N/A	N/A	N/A
Self + 1 dependent under 65	\$2,623.82	\$2,252.42	\$1,682.66	\$1,810.76	\$4,167.52	\$2,928.11	N/A	N/A	N/A
Self + 2 or more dependents under 65	\$3,724.57	\$3,207.76	\$2,426.17	\$2,792.20	\$4,760.80	\$4,091.43	N/A	N/A	N/A
Self + 1 dependent with Medicare Parts A & B	\$1,328.73	\$1,121.28	\$749.82	\$944.64	\$2,368.85	\$1,700.61	N/A	N/A	N/A
Self + 1 dependent with Medicare Part B	\$1,693.20	\$1,419.96	\$964.30	\$1,256.64	\$3,841.26	\$2,928.11	N/A	N/A	N/A

¹ The rates are subject to the approval of the Board of Water and Power Commissioners.

² For retirees who are under age 65 or who are age 65 or over with Medicare Part B only and reside in Nevada.

³ For retirees age 65 or over with Medicare Parts A and B and reside in Nevada.

⁴ 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 medical plan.

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Rates for 2024-2025 LADWP & IBEW Local 18-Sponsored Health Plans¹

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Coverage Level	Kaiser Permanente/ Senior Advantage Colorado	Kaiser Permanente/ Senior Advantage Georgia	Kaiser Permanente/ Senior Advantage Midatlantic (Virginia)	Kaiser Permanente/ Senior Advantage Northwest (Oregon)	Kaiser Permanente/ Senior Advantage Washington
Retiree Under Age 65					
Self Only	\$1,368.96	\$1,263.61	\$1,384.72	\$1,552.91	\$1,804.21
Self + 1 dependent under 65	\$2,737.92	\$2,527.21	\$2,769.42	\$3,105.80	\$3,608.42
Self + 2 or more dependents under 65	\$3,874.15	\$3,576.01	\$3,918.73	\$4,394.72	\$5,105.91
Self + 1 dependent with Medicare Parts A & B	\$1,631.84	\$1,638.75	\$1,692.49	\$2,085.58	\$2,236.46
Self + 1 dependent with Medicare Part B	\$2,165.52	N/A	\$2,180.59	N/A	N/A
Retiree Over Age 65 and with Medicare Parts A & B					
Self Only	\$262.88	\$375.14	\$307.77	\$532.67	\$432.25
Self + 1 dependent under 65	\$1,631.84	\$1,638.74	\$1,692.47	\$2,085.56	\$2,236.46
Self + 2 or more dependents under 65	\$2,811.53	\$2,687.54	\$2,841.78	\$3,374.48	\$3,733.95
Self + 1 dependent with Medicare Parts A & B	\$525.76	\$750.28	\$615.54	\$1,065.34	\$864.50
Self + 1 dependent with Medicare Part B	\$1,059.44	N/A	\$1,103.64	N/A	N/A
Retiree Over Age 65 and with Medicare Part B Only					
Self Only	\$796.56	N/A	\$795.87	N/A	N/A
Self + 1 dependent under 65	\$2,165.52	N/A	\$2,180.57	N/A	N/A
Self + 2 or more dependents under 65	\$3,345.21	N/A	\$3,329.88	N/A	N/A
Self + 1 dependent with Medicare Parts A & B	\$1,059.44	N/A	\$1,103.64	N/A	N/A
Self + 1 dependent with Medicare Part B	\$1,593.12	N/A	\$1,591.74	N/A	N/A

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