

**Washington State Health Insurance Pool (WSHIP)
2024 Monthly Premium Rates**

MEDICARE PLANS

Category	Age	Plan			
		Basic	Basic Plus	Basic Plus Low Income ¹	Medical Supplement
Full Premium	Under 65	\$545	\$853	\$589	\$421
	65+	\$435	\$680	\$345	\$336
You were enrolled in a prior medical benefit plan during the 63-day period prior to application to WSHIP with continuous enrollment for 18 months.	Under 65	\$545	\$853	\$589	\$421
	65+	\$362	\$567	\$345	\$280
You have been enrolled in WSHIP continuously for 36 months or more.	Under 65	\$545	\$853	\$589	\$421
	65+	\$413	\$646	\$345	\$319
You have been enrolled in WSHIP for 36 months or more <u>AND</u> had 18 months of continuous enrollment in a prior medical benefit plan.	Under 65	\$545	\$853	\$589	\$421
	65+	\$344	\$539	\$345	\$266

¹ You must complete a Low Income Application and receive approval prior to being eligible for Low Income rates.