



**2020 Monthly Group Premium Rates
Northern/Central and Southern Illinois
Effective: February 1, 2020**

3310 Fields South Drive
Champaign, IL 61822
1-877-933-0028
TTY/TDD: 711
HealthAlliance.org/Group-Plans

Age	Plan A	Plan F**	Plan G	Plan High G	Plan N
<65	\$191	\$319	\$287	\$102	\$227
65	\$91	\$150	\$135	\$48	\$107
66	\$96	\$160	\$144	\$51	\$114
67	\$104	\$174	\$157	\$56	\$123
68	\$109	\$183	\$165	\$59	\$130
69	\$120	\$200	\$179	\$64	\$142
70	\$128	\$213	\$192	\$69	\$151
71	\$135	\$225	\$202	\$72	\$160
72	\$143	\$238	\$214	\$76	\$169
73	\$150	\$251	\$226	\$81	\$178
74	\$157	\$262	\$236	\$84	\$186
75	\$170	\$283	\$255	\$91	\$201
76	\$178	\$297	\$267	\$95	\$211
77	\$185	\$308	\$278	\$99	\$220
78	\$191	\$319	\$286	\$102	\$226
79	\$197	\$328	\$296	\$106	\$233
80	\$199	\$332	\$299	\$107	\$236
81	\$205	\$343	\$308	\$110	\$243
82	\$209	\$348	\$314	\$112	\$248
83	\$212	\$354	\$318	\$114	\$251
84	\$217	\$363	\$327	\$117	\$257
85+	\$237	\$394	\$354	\$126	\$280

*Rates shown are for outside of Cook, DuPage, Kane, Lake, McHenry and Will counties.

**Plan F is available to those that are Medicare eligible prior to 1/1/2020.