

GIC Health Plan Rates
MONTHLY RATES AS OF JULY 1, 2018
FOR THE **TOWN OF STONEHAM** ENROLLEES

Active Employees, Retirees and Survivors without Medicare

	Teacher Who Retired Before July 1, 2009 Pays Monthly %	Teacher Who Retired Before July 1, 2009 Pays Monthly \$	Teacher Who Retired Before July 1, 2009 Pays Monthly \$	Employee and Non-Medicare Retiree/ Survivor Pays Monthly %	Employee and Non-Medicare Retiree/ Survivor Pays Monthly \$	Employee and Non-Medicare Retiree/ Survivor Pays Monthly \$
Health Plan		Individual Coverage	Family Coverage		Individual Coverage	Family Coverage
Fallon Health Direct Care	10%	56.63	142.30	20%	113.26	284.60
Fallon Health Select Care	10%	76.56	185.56	20%	153.12	371.11
Harvard Pilgrim Independence Plan	10%	82.67	200.94	20%	165.34	401.88
Harvard Pilgrim Primary Choice Plan	10%	60.32	152.91	20%	120.65	305.82
Health New England	10%	55.10	130.65	20%	110.19	261.31
NHP Prime (Neighborhood Health Plan)	10%	58.04	149.61	20%	116.09	299.22
Tufts Health Plan Navigator	10%	74.35	181.19	20%	148.69	362.37
Tufts Health Plan Spirit	10%	56.42	135.54	20%	112.85	271.09
UniCare State Indemnity Plan/Basic <i>with CIC (Comprehensive)</i>	10%	105.84	234.35	40%	423.36	937.38
UniCare State Indemnity Plan/Basic <i>without CIC (Non-Comprehensive)</i>	10%	100.97	223.25	40%	403.87	893.01
UniCare State Indemnity Plan/Community Choice	10%	50.22	123.65	20%	100.43	247.30
UniCare State Indemnity Plan/PLUS	10%	69.61	165.45	20%	139.22	330.91

Retirees and Survivors with Medicare

Health Plan	Teacher Who Retired Before July 1, 2009 Pays Monthly Per Person		Retiree and Survivor Pays Monthly Per Person	
	%	\$	%	\$
Harvard Pilgrim Medicare Enhance	10%	38.26	20%	76.52
Health New England MedPlus	10%	38.68	20%	77.36
Tufts Health Plan Medicare Complement	10%	36.17	20%	72.35
Tufts Health Plan Medicare Preferred**	10%	32.20	20%	64.39
UniCare State Indemnity Plan/Medicare Extension (OME) <i>with CIC (Comprehensive)</i>	10%	37.97	40%	151.87
UniCare State Indemnity Plan/Medicare Extension (OME) <i>without CIC (Non-Comprehensive)</i>	10%	36.86	40%	147.44

Change had been made to Tufts Health Plan Medicare Preferred effective January 1, 2019.

Rates are calculated by the Town of Stoneham Benefits Office.

RATE QUESTIONS?

**CALL: Municipal Benefits Coordinator (781) 279-2630
Payroll/Benefits Coordinator, Stoneham Schools (781) 279-3802 x1301**