

Town of Medfield

Health-Life-Dental Insurance Rates

July 1, 2023-June 30, 2024

BASED ON 24 PAYS

3rd ppd of month NO INSURANCE WILL BE DEDUCTED

BCBS Zero Deductible HMO PLAN	Deduct Code	INDIVIDUAL	FAMILY	Town %	Employee %	Rate Changes Effective
Total Monthly Cost		\$962.83	\$2,504.71			<i>July 1st</i>
Town Share		\$596.95	\$1,552.92	62%		
Employee Share - Monthly	18	\$365.88	\$951.79		38%	
Bi-Monthly	U	\$182.94	\$475.89			
COBRA		\$982.09	\$2,554.80		102%	
<i>Retiree Share-monthly</i>		<i>\$481.42</i>	<i>\$1,252.36</i>		50%	

BCBS Zero Deductible PPO PLAN	INDIVIDUAL	FAMILY	Town %	Employee %	Rate Changes Effective
Total Monthly Cost	\$972.70	\$2,531.32			<i>July 1st</i>
Town Share	\$486.35	\$1,265.66	50%		
Employee Share - Monthly	19	\$486.35	\$1,265.66		50%
Bi-Monthly	H	\$243.18	\$632.83		
COBRA	\$992.15	\$2,581.95		102%	
<i>Retiree Share-monthly</i>	<i>\$486.35</i>	<i>\$1,265.66</i>		50%	

BCBS ACCESS BLUE HMO NE SAVER \$2000	INDIVIDUAL (\$2000 Deductible)	FAMILY (\$4000 Deductible)	Town %	Employee %	Rate Changes Effective
Town HSA Annual Deductible Contribution	\$600.00	\$1,200.00			July 1st
Total Monthly Cost	\$816.75	\$2,124.66			
Town Share	\$506.39	\$1,317.29	62%		
Employee Share - Monthly	\$310.37	\$807.37		38%	
Bi-Monthly	\$155.19	\$403.69			
COBRA	\$833.09	\$2,167.15		102%	

DELTA DENTAL (2 options)	INDIVIDUAL	FAMILY	Town %	Employee %	Rate Changes Effective
Premier Table Plan MA Providers					
Total Cost -Monthly	\$30.08	\$74.26		100%	July 1st
Employee Share - Monthly	\$30.08	\$74.26			
Bi-Monthly	\$15.04	\$37.13			

PPO Plus Premier National Network			100%	<i>July 1st</i>
Total Cost -Monthly	\$41.46	\$105.72		
Employee Share - Monthly	\$41.46	\$105.72		
Bi-Monthly	\$20.73	\$52.86		

MEDICARE ELIGIBLE RETIREE PLANS		Town	Employee	Rate Changes Effective
	<u>Blue Cross/Blue Shield</u>			January 1st
	<u>Medex 2 w/ Drug Rider</u>			
Total Monthly Cost		\$339.88		
Town Monthly Share		\$169.94	50%	

Retiree LIS (Low income subsidy) share	\$136.54	Town	Employee	Rate Changes Effective
LIFE INSURANCE - Basic \$5,000 (code L)				
Total Monthly Cost	\$7.45			<i>July 1st</i>
Bi-Monthly	\$1.87	50%	50%	

LIFE INSURANCE - Voluntary <u>(code I)</u>		Town %	Employee %	Rate Changes Effective
Bi-Monthly \$3.90 per \$5,000 Coverage up to \$50,000 - Drops to \$5000 at	\$1.95		100%	<i>July 1st</i>