

**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

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

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

<b>BCBS ACCESS BLUE HMO NE SAVER \$2000</b>		<b>INDIVIDUAL (\$2000 Deductible)</b>	<b>FAMILY (\$4000 Deductible)</b>	Town %	Employee %	Rate Changes Effective
<b>Town HSA Annual Deductible Contribution</b>		<b>\$600.00</b>	<b>\$1,200.00</b>			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%	
<b>Bi-Monthly</b>		<b>\$155.19</b>	<b>\$403.69</b>			
COBRA		\$833.09	\$2,167.15		102%	

<b>DELTA DENTAL (2 options)</b>		<b>INDIVIDUAL</b>	<b>FAMILY</b>	Town %	Employee %	Rate Changes Effective
<b>Premier Table Plan MA Providers</b>						
Total Cost -Monthly		\$30.08	\$74.26		100%	July 1st
Employee Share - Monthly		\$30.08	\$74.26			
<b>Bi-Monthly</b>		<b>\$15.04</b>	<b>\$37.13</b>			
<b>PPO Plus Premier National Network</b>						
Total Cost -Monthly		\$41.46	\$105.72		100%	July 1st
Employee Share - Monthly		\$41.46	\$105.72			
<b>Bi-Monthly</b>		<b>\$20.73</b>	<b>\$52.86</b>			

<b>MEDICARE ELIGIBLE RETIREE PLANS</b>			Town %	Employee %	Rate Changes Effective
		<b><u>Blue Cross/Blue Shield</u></b>			January 1st
		<b><u>Medex 2 w/ Drug Rider</u></b>			
Total Monthly Cost		\$339.88			
Town Monthly Share		\$169.94	50%		
<b>Retiree Share- Monthly</b>		<b>\$169.94</b>		50%	
<b>Retiree LIS (Low income subsidy) share</b>		<b>\$136.54</b>			

<b>LIFE INSURANCE - Basic \$5,000 (code L )</b>			Town %	Employee %	Rate Changes Effective
Total Monthly Cost		\$7.45			July 1st
<b>Bi-Monthly</b>		<b>\$1.87</b>	50%	50%	

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