

Non-Medicare Health Insurance Rates



Monthly GIC Product Rates Effective July 1, 2021

		NON-MEDICARE RETIREES Retired on or before July 1, 1994 and SURVIVORS ¹		NON-MEDICARE RETIREES Retired after July 1, 1994 and who filed for retirement on or before October 1, 2009		NON-MEDICARE RETIREES who filed for retirement after October 1, 2009	
		10%		15%		20%	
		RETIREE/SURVIVOR PAYS MONTHLY		RETIREE PAYS MONTHLY		RETIREE PAYS MONTHLY	
BASIC LIFE INSURANCE ONLY - \$5,000 Coverage		\$0.64		\$0.95		\$1.27	
HEALTH INSURANCE PRODUCTS (Premium includes Basic Life Insurance)	PRODUCT CATEGORY	INDIVIDUAL COVERAGE	FAMILY COVERAGE	INDIVIDUAL COVERAGE	FAMILY COVERAGE	INDIVIDUAL COVERAGE	FAMILY COVERAGE
UniCare State Indemnity Plan/Basic <i>with</i> CIC ² (Comprehensive)	National Network	\$174.99	\$390.86	\$232.28	\$517.53	\$289.58	\$644.22
UniCare State Indemnity Plan/Basic <i>without</i> CIC		\$114.60	\$253.37	\$171.89	\$380.04	\$229.19	\$506.73
UniCare State Indemnity Plan/PLUS	Broad Network	\$78.57	\$186.66	\$117.84	\$279.98	\$157.12	\$373.31
Tufts Health Plan Navigator		\$84.01	\$204.52	\$126.01	\$306.77	\$168.02	\$409.03
Fallon Health Select Care		\$86.64	\$209.97	\$129.95	\$314.94	\$173.27	\$419.92
Harvard Pilgrim Independence Plan		\$96.73	\$235.43	\$145.09	\$353.14	\$193.45	\$470.85
Health New England	Regional Network	\$63.45	\$150.56	\$95.17	\$225.83	\$126.90	\$301.11
AllWays Health Partners Complete HMO		\$77.17	\$200.51	\$115.74	\$300.75	\$154.33	\$401.01
UniCare State Indemnity Plan/Community Choice	Limited Network	\$59.82	\$147.71	\$89.71	\$221.55	\$119.62	\$295.41
Tufts Health Plan Spirit		\$64.29	\$154.29	\$96.42	\$231.43	\$128.57	\$308.58
Fallon Health Direct Care		\$64.17	\$161.25	\$96.25	\$241.86	\$128.33	\$322.49
Harvard Pilgrim Primary Choice		\$70.19	\$178.21	\$105.28	\$267.31	\$140.37	\$356.42

1 Survivors are not eligible for life insurance. For monthly health insurance premium cost, deduct \$.64 from monthly "Retiree/Survivor Pays Monthly" premium.

2 CIC is an enrollee-pay-all benefit.