**GIC Health Plan Rates**

# MONTHLY RATES AS OF JULY 1, 2017

FOR THE **TOWN OF SWAMPSCOTT** ENROLLEES

**INCLUDING THE .35% ADMINISTRATIVE FEE**

**Active Employees, Retirees and Survivors without Medicare**

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| --- | --- | --- | --- |
|  | 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** |
| Fallon Health Direct Care | 28.5% | $158.08 | $379.40 |
| Fallon Health Select Care | 28.5% | $210.08 | $504.12 |
| Harvard Pilgrim Independence Plan | 28.5% | $234.92 | $573.16 |
| Harvard Pilgrim Primary Choice Plan | 28.5% | $176.88 | $431.64 |
| Health New England | 28.5% | $156.24 | $387.32 |
| NHP Prime (Neighborhood Health Plan) | 28.5% | $157.92 | $418.44 |
| Tufts Health Plan Navigator | 28.5% | $207.72 | $506.84 |
| Tufts Health Plan Spirit | 28.5% | $157.68 | $379.60 |
| UniCare State Indemnity Plan/Basic with CIC (Comprehensive) | 40.0% | $415.52 | $972.24 |
| UniCare State Indemnity Plan/Basic without CIC (Non-Comprehensive) | 40.0% | $396.72 | $928.60 |
| UniCare State Indemnity Plan/Community Choice | 28.5% | $148.36 | $356.08 |
| UniCare State Indemnity Plan/PLUS | 28.5% | $197.56 | $472.00 |

## Retirees and Survivors with Medicare

|  |  |
| --- | --- |
|  | **Retiree and Survivor****Retiree/Survivor Pays Monthly Per Person (Rates Include 70% Medicare B Reimbursement\*\*)** |
| **Health Plan** | Percentage | Dollars |
| Fallon Senior Plan\* | 28.5% | $2.01 |
| Harvard Pilgrim Medicare Enhance | 40.0% | $75.42 |
| Health New England MedPlus | 28.5% | $18.73 |
| Tufts Health Plan Medicare Complement | 28.5% | $15.14 |
| Tufts Health Plan Medicare Preferred\* | 28.5% | $0.01 |
| UniCare State Indemnity Plan/Medicare Extension (OME) with CIC (Comprehensive) | 40.0% | $58.46 |
| UniCare State Indemnity Plan/Medicare Extension (OME) without CIC (Non-Comprehensive) | 40.0% | $54.16 |

\*Benefits and rates of Fallon Senior Plan and Tufts Health Plan Medicare Preferred are subject to federal approval and may change on January 1, 2018.

*\*\*70% Medicare Part B Reimbursement will be deducted.*

*Rates are calculated by the Town of Swampscott Personnel Office.*

**RATE QUESTIONS?**

**CALL the Personnel Office at 781-596-8859**

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