**INCLUDING THE.35 % ADMINISTRATIVE FEE**

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

|  |  |  |  |
| --- | --- | --- | --- |
| **Health Plan** | **% Responsible for** | **Monthly**  **$ Amount for Individual**  **Plan** | **Monthly**  **$ Amount for Family**  **Plan** |
| Fallon Health Direct Care | 15% | 83.20 | 199.68 |
| Fallon Health Select Care | 15% | 110.56 | 265.33 |
| Harvard Pilgrim Independence Plan | 17% | 140.12 | 341.89 |
| Harvard Pilgrim Primary Choice Plan | 15% | 93.11 | 227.18 |
| Health New England | 15% | 82.22 | 203.85 |
| NHP Prime *(Neighborhood Health Plan)* | 15% | 83.11 | 220.23 |
| Tufts Health Plan Navigator | 17% | 123.90 | 302.33 |
| Tufts Health Plan Spirit | 15% | 82.99 | 199.79 |
| UniCare State Indemnity Plan/Basic *with CIC (Comprehensive)* | 35% | 363.58 | 850.69 |
| UniCare State Indemnity Plan/Basic *without CIC (Non-Comprehensive)* | 35% | 347.13 | 812.53 |
| UniCare State Indemnity Plan/Community Choice | 17% | 88.50 | 212.41 |
| UniCare State Indemnity Plan/PLUS | 17% | 117.84 | 281.54 |

**Retirees and Survivors with Medicare**

|  |  |  |
| --- | --- | --- |
| **Health Plan** | **% Responsible for** | **Monthly $ Amount**  **Per Person** |
| Fallon Senior Plan\* | 15% | 50.43 |
| Harvard Pilgrim Medicare Enhance | 35% | 148.07 |
| Health New England MedPlus | 15% | 59.23 |
| Tufts Health Plan Medicare Complement | 15% | 57.34 |
| Tufts Health Plan Medicare Preferred\* | 15% | 45.16 |
| UniCare State Indemnity Plan/Medicare Extension (OME) with CIC (Comprehensive) | 35% | 133.22 |
| UniCare State Indemnity Plan/Medicare Extension (OME) without CIC (Non-Comprehensive) | 35% | 129.47 |

***\*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.***

|  |  |
| --- | --- |
| **GIC RETIREE DENTAL PLAN** | |
| Includes .35% Administrative Fee | |
| **Monthly GIC Plan Rates as of July 1, 2017** | |
| $1,250 Maximum Annual Benefit Per Member | |
| Coverage Type | Retiree Pays Monthly |
| Single | $29.47 |
| Family | $71 |