GIC Health Plan Rates

FY21 MONTHLY RATES AS OF JULY 1, 2020 FOR THE **TOWN OF MILLIS** ENROLLEES

Including the .35% Administrative Fee

Active Employees, Survivors, and Retirees without Medicare

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Teacher	Teacher	Teacher	Employee	Employee	Employee
Who	Who	Who	and Non-	and Non-	and Non-
Retired	Retired	Retired	Medicare	Medicare	Medicare
Before	Before	Before	Retiree/	Retiree/	Retiree/
July 1,	July 1,	July 1,	Survivor	Survivor	Survivor
2008 Pays	2008 Pays	2008 Pays	Pays	Pays	Pays
Monthly %	Monthly \$	Monthly \$	Monthly %	Monthly \$	Monthly \$
	Individual	Family		Individual	Family
	Coverage	Coverage		Coverage	Coverage
10%	61.86	156.15	30%	185.57	468.44
10%	83.62	203.30	30%	250.86	609.91
10%	91.72	223.92	30%	275.15	671.76
10%	66.54	169.70	30%	199.63	509.11
10%	59.43	141.48	30%	178.29	424.44
10%	68.79	178.95	30%	206.36	536.84
10%	79.90	195.15	30%	239.71	585.44
10%	60.67	146.16	30%	182.00	438.47
10%	167.08	373.74	50%	610.05	1355.51
10%	110.74	245.44	50%	553.71	1227.21
10%	55.26	136.81	30%	165.77	410.42
10%	72.37	172.25	30%	217.12	516.75
	Who Retired Before July 1, 2008 Pays Monthly % 10% 10% 10% 10% 10% 10% 10% 10% 10% 1	Who Retired Before July 1, 2008 Pays Monthly % Individual Coverage 10% 61.86 10% 83.62 10% 91.72 10% 66.54 10% 59.43 10% 68.79 10% 79.90 10% 60.67 10% 110.74	Who Retired Before July 1, 2008 Pays Monthly % Who Retired Before July 1, 2008 Pays Monthly \$ Who Retired Before July 1, 2008 Pays Monthly \$ Individual Coverage Family Coverage 10% 61.86 156.15 10% 91.72 223.92 10% 66.54 169.70 10% 59.43 141.48 10% 68.79 178.95 10% 60.67 146.16 10% 167.08 373.74 10% 10.74 245.44 10% 55.26 136.81	Who Retired Before July 1, 2008 Pays Monthly % Who Retired Before July 1, 2008 Pays Monthly \$ Who Retired Before Before Pays Monthly \$ Who Retired Before Pays Survivor Pays Monthly \$ Who Survivor Pays Monthly \$ Individual Coverage 10% Family Coverage Pays Pays Monthly \$ Monthly \$ Monthly \$ 10% 61.86 156.15 30% 10% 91.72 223.92 30% 10% 66.54 169.70 30% 10% 59.43 141.48 30% 10% 68.79 178.95 30% 10% 60.67 146.16 30% 10% 167.08 373.74 50% 10% 10.74 245.44 50% 10% 55.26 136.81 30%	Who Retired Before July 1, 2008 Pays Monthly % Who Retired Before July 1, 2008 Pays Monthly \$ Who Retired Before July 1, 2008 Pays Monthly \$ Who Retired Before Survivor Retiree/ Survivor Pays Monthly \$ Medicare Retiree/ Survivor Pays Monthly \$ Individual Coverage Family Coverage Individual Coverage Individual Coverage 10% 61.86 156.15 30% 185.57 10% 83.62 203.30 30% 250.86 10% 91.72 223.92 30% 275.15 10% 66.54 169.70 30% 199.63 10% 59.43 141.48 30% 178.29 10% 68.79 178.95 30% 206.36 10% 79.90 195.15 30% 239.71 10% 167.08 373.74 50% 610.05 10% 110.74 245.44 50% 553.71 10% 55.26 136.81 30% 165.77

Retirees and Survivors with Medicare

	July 1, 2008	Retired Before Pays Monthly Person	Retiree and Survivor Pays Monthly Per Person		
Health Plan	%	\$	%	\$	
Harvard Pilgrim Medicare Enhance	10%	40.40	50%	202.02	
Health New England MedPlus	10%	40.48	50%	202.40	
Tufts Health Plan Medicare Complement	10%	38.39	50%	191.94	
Tufts Health Plan Medicare Preferred*	10%	32.51	30%	97.54	
UniCare State Indemnity Plan/Medicare Extension (OME) with CIC (Comprehensive)	10%	49.94	50%	205.46	
UniCare State Indemnity Plan/Medicare Extension (OME) without CIC (Non-Comprehensive)	10%	38.88	50%	194.40	

*Benefits and rates of Tufts Health Plan Medicare Preferred are subject to federal approval and may change on January 1, 2021.

GIC RETIREE DENTAL PLAN				
Includes %.35 Administrative Fee				
Monthly GIC Plan Rates as of July 1, 2020				
\$1,250 Maximum Annual Benefit Per Member				
Coverage Type	Retiree Pays Monthly			
Single	29.92			
Family	72.07			

Rates are calculated by the Town of Millis Benefits Office.

RATE QUESTIONS? CALL: 1-508-376-7091