

Town of Medfield

Health-Life-Dental Insurance Rates

July 1,2021-June 30, 2022

BASED ON 24 PAYS

3rd ppd of month NO INSURANCE WILL BE DEDUCTED

BCBS Zero Deductible HMO PLAN	Deduct Code	INDIVIDUAL	FAMILY	Town %	Employee %	Rate Changes Effective
Total Monthly Cost		\$855.82	\$2,226.32			July 1st
Town Share		\$530.61	\$1,380.32	62%		
Employee Share - Monthly	18	\$325.21	\$846.00		38%	
Bi-Monthly	U	\$162.61	\$423.00			
COBRA		\$872.94	\$2,270.85		102%	
Retiree Share-monthly		\$427.91	\$1,113.16		50%	

BCBS Zero Deductible PPO PLAN		INDIVIDUAL	FAMILY	Town %	Employee %	Rate Changes Effective
Total Monthly Cost		\$864.59	\$2,249.97			July 1st
Town Share		\$432.30	\$1,124.99	50%		
Employee Share - Monthly	19	\$432.30	\$1,124.99		50%	
Bi-Monthly	H	\$216.15	\$562.50			
COBRA		\$881.88	\$2,294.97		102%	
Retiree Share-monthly		\$432.30	\$1,124.99		50%	

BCBS ACCESS BLUE HMO NE SAVER \$2000		INDIVIDUAL (\$2000 Deductible)	FAMILY (\$4000 Deductible)	Town %	Employee %	Rate Changes Effective
Town HSA Annual Deductible Contribution		\$600.00	\$1,200.00			July 1st
Total Monthly Cost		\$725.97	\$1,888.51			
Town Share		\$450.10	\$1,170.88	62%		
Employee Share - Monthly		\$275.87	\$717.63		38%	
Bi-Monthly		\$137.94	\$358.82			

DELTA DENTAL (2 options)		INDIVIDUAL	FAMILY	Town %	Employee %	Rate Changes Effective
Premier Table Plan MA Providers						
Total Cost -Monthly		\$30.08	\$74.26		100%	July 1st
Employee Share - Monthly		\$30.08	\$74.26			
Bi-Monthly		\$15.04	\$37.13			

PPO Plus Premier National Network				Town %	Employee %	Rate Changes Effective
Total Cost -Monthly		\$41.46	\$105.72		100%	July 1st
Employee Share - Monthly		\$41.46	\$105.72			
Bi-Monthly		\$20.73	\$52.86			

MEDICARE ELIGIBLE RETIREE PLANS				Town %	Employee %	Rate Changes Effective
						January 1st
Total Monthly Cost		\$335.38				
Town Monthly Share		\$167.69		50%		
Retiree Share- Monthly		\$167.69			50%	
Retiree LIS (Low income subsidy) share		\$134.99				

LIFE INSURANCE - Basic \$5,000 (code L)				Town %	Employee %	Rate Changes Effective
Total Monthly Cost		\$6.50				July 1st
Bi-Monthly		\$1.63		50%	50%	

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