

**FY19 Health Insurance Rates  
July 1, 2018 Thru June 30, 2019**

Plan Name	20% for retiree		Town Portion	Employee Portion	Employee Portion	Employee Portion	Employee Portion
		100%	80%	20%	Weekly	Bi-Weekly	19 Week
Tufts POS	Ind	\$ 1,028.00	\$ 822.40	\$ 205.60	\$ 47.45	\$ 94.89	\$ 129.85
*****	Family	\$ 2,696.99	\$ 2,157.59	\$ 539.40	\$ 124.48	\$ 248.95	\$ 340.67
Tufts Advantage HMO	Ind	\$ 733.70	\$ 586.96	\$ 146.74	\$ 33.86	\$ 67.73	\$ 92.68
\$1000 Deductible Plan	Family	\$ 1,924.39	\$ 1,539.51	\$ 384.88	\$ 88.82	\$ 177.64	\$ 243.08
Fallon Select Care	Ind	\$ 811.76	\$ 649.41	\$ 162.35	\$ 37.47	\$ 74.93	\$ 102.54
Premium Saver 1500	Family	\$ 2,129.15	\$ 1,703.32	\$ 425.83	\$ 98.27	\$ 196.54	\$ 268.95
Fallon Direct Care	Ind	\$ 730.57	\$ 584.46	\$ 146.11	\$ 33.72	\$ 67.44	\$ 92.28
Premium Saver 1500	Family	\$ 1,916.24	\$ 1,532.99	\$ 383.25	\$ 88.44	\$ 176.88	\$ 242.05
Fallon Direct Care Bronze	Ind	\$ 584.47	\$ 467.58	\$ 116.89	\$ 26.98	\$ 53.95	\$ 73.83
*****	Family	\$ 1,532.99	\$ 1,226.39	\$ 306.60	\$ 70.75	\$ 141.51	\$ 193.64

\*\*\*\*\*The HRA Choice Strategies MasterCard does not work with Tufts POS or Fallon Direct Bronze\*\*\*\*\*

Plan Name	25% for hires before July 1, 2008		Town Portion	Employee Portion	Employee Portion	Employee Portion	Employee Portion
		100%	75%	25%	Weekly	Bi-Weekly	19 Week
Tufts POS	Ind	\$ 1,028.00	\$ 771.00	\$ 257.00	\$ 59.31	\$ 118.62	\$ 162.32
*****	Family	\$ 2,696.99	\$ 2,022.74	\$ 674.25	\$ 155.60	\$ 311.19	\$ 425.84
Tufts Advantage HMO	Ind	\$ 733.70	\$ 550.28	\$ 183.43	\$ 42.33	\$ 84.66	\$ 115.85
\$1000 Deductible Plan	Family	\$ 1,924.39	\$ 1,443.29	\$ 481.10	\$ 111.02	\$ 222.05	\$ 303.85
Fallon Select Care	Ind	\$ 811.76	\$ 608.82	\$ 202.94	\$ 46.83	\$ 93.66	\$ 128.17
Premium Saver 1500	Family	\$ 2,129.15	\$ 1,596.86	\$ 532.29	\$ 122.84	\$ 245.67	\$ 336.18
Fallon Direct Care	Ind	\$ 730.57	\$ 547.93	\$ 182.64	\$ 42.15	\$ 84.30	\$ 115.35
Premium Saver 1500	Family	\$ 1,916.24	\$ 1,437.18	\$ 479.06	\$ 110.55	\$ 221.10	\$ 302.56
Fallon Direct Care Bronze	Ind	\$ 584.47	\$ 438.35	\$ 146.12	\$ 33.72	\$ 67.44	\$ 92.28
*****	Family	\$ 1,532.99	\$ 1,149.74	\$ 383.25	\$ 88.44	\$ 176.88	\$ 242.05

\*\*\*\*\*The HRA Choice Strategies MasterCard does not work with Tufts POS or Fallon Direct Bronze\*\*\*\*\*

Plan Name	30% for hires after July 1, 2008		Town Portion	Employee Portion	Employee Portion	Employee Portion	Employee Portion
		100%	70%	30%	Weekly	Bi-Weekly	19 Week
Tufts POS	Ind	\$ 1,028.00	\$ 719.60	\$ 308.40	\$ 71.17	\$ 142.34	\$ 194.78
*****	Family	\$ 2,696.99	\$ 1,887.89	\$ 809.10	\$ 186.71	\$ 373.43	\$ 511.01
Tufts Advantage HMO	Ind	\$ 733.70	\$ 513.59	\$ 220.11	\$ 50.79	\$ 101.59	\$ 139.02
\$1000 Deductible Plan	Family	\$ 1,924.39	\$ 1,347.07	\$ 577.32	\$ 133.23	\$ 266.45	\$ 364.62
Fallon Select Care	Ind	\$ 811.76	\$ 568.23	\$ 243.53	\$ 56.20	\$ 112.40	\$ 153.81
Premium Saver 1500	Family	\$ 2,129.15	\$ 1,490.41	\$ 638.75	\$ 147.40	\$ 294.81	\$ 403.42
Fallon Direct Care	Ind	\$ 730.57	\$ 511.40	\$ 219.17	\$ 50.58	\$ 101.16	\$ 138.42
Premium Saver 1500	Family	\$ 1,916.24	\$ 1,341.37	\$ 574.87	\$ 132.66	\$ 265.33	\$ 363.08
Fallon Direct Care Bronze	Ind	\$ 584.47	\$ 409.13	\$ 175.34	\$ 40.46	\$ 80.93	\$ 110.74
*****	Family	\$ 1,532.99	\$ 1,073.09	\$ 459.90	\$ 106.13	\$ 212.26	\$ 290.46

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		Employee Portion 100%	Employee Portion 100%	Employee Portion 100%	Employee Portion 100%
			Weekly	Bi-Weekly	19 Week
Altus Dental	Ind		\$47.68	\$ 11.00	\$ 22.01
Group #6419-0001	Family		\$122.17	\$ 28.19	\$ 56.39
VSP - Vision	Ind		\$7.52	\$ 1.74	\$ 3.47
Group #300204030001	Family		\$16.18	\$ 3.73	\$ 7.47
Basic Life 10K #26238	Ind	cost \$16.80	split 50/50	\$8.40	\$ 1.94
				\$ 3.88	\$ 5.31

**PLEASE NOTE: NEW RATES WILL TAKE EFFECT ON THE FIRST PAYCHECK IN JUNE 2018**