## Town of Westwood - GIC Health Plans MONTHLY RATES effective July 1, 2023

Employee and Non-Medicare Retiree/Survivor Health Plans								
PRODUCT CATEGORY	PRODUCT TYPE	HEALTH PRODUCT	Employee/Retiree Amount for INDIVIDUAL COVERAGE	Employee/Retiree Amount for FAMILY COVERAGE				
National Network	PPO	Harvard Pilgrim Access America - For Non-Medicare Retirees/Survivors that live out of the New England region	\$377.73	\$841.29				
Broad Network	PPO-Type	UniCare PLUS	\$282.88	\$671.35				
	НМО	Mass General Brigham Health Plan Complete	\$285.60	\$752.77				
	POS	Harvard Pilgrim Explorer	\$312.45	\$772.12				
	Indemnity	UniCare Total Choice	\$674.22	\$1,491.59				
Regional Network	НМО	Health New England - Western MA residency only	\$235.20	\$562.44				
Limited Network	PPO-Type	UniCare Community Choice	\$216.56	\$534.13				
	НМО	Harvard Pilgrim Quality	\$230.83	\$585.36				

The above rates are 32% of the full monthly health insurance premiums. The Town pays the remaining 68%.

The UniCare Total Choice Indemnity is the exception and is split 50% with the Town.

Medicare Plans							
PRODUCT CATEGORY	PRODUCT TYPE	HEALTH PRODUCT	Retiree Pays Per Person				
Medicare Advantage	НМО	Tufts Health Plan Medicare Preferred	\$176.38				
Medicare Supplement	Indemnity	Harvard Pilgrim Medicare Enhance	\$210.92				
		UniCare Medicare Extension	\$212.56				
		Health New England MedPlus	\$215.15				

The above rates are 50% of the full monthly health insurance premiums. The Town pays the remaining 50%.

**Rate Questions?** 



781.320.1072

