

**Town of Westwood - GIC Health Plans**  
**MONTHLY RATES effective July 1, 2024 - June 30, 2025**

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 - <i>Non-Medicare Retirees/Survivors that live out of New England</i>	\$403.00	\$898.96
Broad Network	Indemnity	Wellpoint Total Choice	\$750.68	\$1,665.86
	PPO-Type	Wellpoint PLUS	\$306.76	\$730.90
	POS	Harvard Pilgrim Explorer	\$341.72	\$846.69
	HMO	Mass General Brigham Health Plan Complete	\$312.85	\$827.33
Limited Network	HMO	Harvard Pilgrim Quality	\$252.17	\$641.86
	PPO-Type	Wellpoint Community Choice	\$238.39	\$591.71
Regional Network	HMO	Health New England - <i>Western MA residency only</i>	\$249.04	\$597.43

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	HMO	Tufts Health Plan Medicare Preferred	\$181.92
Medicare Supplement	Indemnity	Harvard Pilgrim Medicare Enhance	\$218.07
		Health New England MedPlus	\$219.40
		Wellpoint Medicare Extension	\$222.34

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

Rate Questions?



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