

GIC Health Plan Rates

MONTHLY RATES AS OF JULY 1, 2024

FOR THE CITY OF SOMERVILLE ENROLLEES

INCLUDING THE .30% ADMINISTRATIVE FEE

Active Employees, Retirees and Survivors without Medicare

Employee and Non-Medicare Retiree/ Survivor Rates					
PRODUCT CATEGORY	PRODUCT TYPE	HEALTH PRODUCT	Contribution Rate	Individual Coverage	Family Coverage
National Network	PPO	Harvard Pilgrim Access America	20%	\$251.88	\$561.85
Broad Network	INDEMNITY	Wellpoint Total Choice	25%	\$375.34	\$832.93
	PPO-TYPE	Wellpoint PLUS	20%	\$191.72	\$456.81
	POS	Harvard Pilgrim Explorer	20%	\$213.57	\$529.18
	HMO	Mass General Brigham Health Plan Complete	20%	\$195.53	\$517.08
Regional Network	HMO	Health New England	20%	\$155.65	\$373.39
Limited Network	PPO-TYPE	Wellpoint Community Choice	20%	\$148.99	\$369.82
	HMO	Harvard Pilgrim Quality	20%	\$157.61	\$401.16

Retirees and Survivors with Medicare

Medicare Plan Rates				
PRODUCT CATEGORY	PRODUCT TYPE	HEALTH PRODUCT	Contribution Rate	Individual Coverage
National Network - Medicare Supplement	INDEMNITY	Wellpoint Medicare Extension	25%	\$111.17
		Harvard Pilgrim Medicare Enhanced		\$109.03
		Health New England Medicare Supplement Plus		\$109.70
Limited Network - Medicare Advantage	HMO	Tufts Health Plan Medicare Preferred	20%	\$72.77

Rates are calculated by the City of Somerville Human Resources Department

Rate questions? CALL PERSONNEL: 617-625-6600 x3324
