



Town of Westford
Westford Public Schools
HEALTH INSURANCE
&
VOLUNTARY BENEFIT PREMIUMS
11/1/20 – 10/31/21

(Health Insurance 4.9% Increase & Dental Insurance 2.9% Increase)

| BLUE CROSS BLUE SHIELD (BCBS) of Massachusetts | "Premium"/High Plan | | |
|---|-----------------------|-------------------------------|-----------------------------------|
| PPO Employer share of premium - 60% HMO Employer Share of Premium - 65% | Total Monthly Premium | Town Monthly Share of Premium | Employee Monthly Share of Premium |
| PPO: | | | |
| Individual | \$1,009.52 | \$605.71 | \$403.81 |
| Family | \$2,647.96 | \$1,588.78 | \$1,059.18 |
| HMO NE Blue - Premium Plan | | | |
| Individual | \$932.91 | \$606.39 | \$326.52 |
| Family | \$2,447.01 | \$1,590.56 | \$856.45 |
| HMO NE Blue - Value Plan | | | |
| Individual | \$892.58 | \$580.18 | \$312.40 |
| Family | \$2,341.24 | \$1,521.81 | \$819.43 |
| ACA Minimum Credible Coverage Plan - If you would like information about this high deductible plan, please contact Human Resources at 978-399-2915. | | | |

| Medicare Supplemental Plans | | | |
|---|----------|----------|----------|
| Medicare Supplemental Employer share of premium - 60% | | | |
| Rates Effective 1/1/2021 (-6.5% Rate Decrease) | | | |
| Medex II with PDP - Individual | \$346.58 | \$207.95 | \$138.63 |
| HMO - Managed Blue for Seniors | \$346.58 | \$207.95 | \$138.63 |

| Dental Blue Freedom BCBS | High Option: | Low Option: |
|--|--------------|-------------|
| Employee only (single) | \$57.59 | \$38.74 |
| Employee + 1 dependent (2-person) | \$116.28 | \$82.53 |
| Employee + 2 or more dependents (family) | \$165.73 | \$115.47 |

| MetLife VSP Vision Plan - 0% Increase | |
|--|---------|
| Employee only (single) | \$8.81 |
| Employee + 1 dependent (2-person) | \$20.61 |
| Employee + two or more dependents (family) | \$26.24 |

| Voluntary Town Life Insurance | | |
|-------------------------------|------------------------|------------|
| 0% increase | Employee/Retiree Share | |
| Active | \$10,000.00 | \$53/month |
| Active 65+ | \$6,700.00 | \$35/month |
| Active 70+ | \$5,500.00 | \$29/month |
| Retiree | \$1,500.00 | \$35/month |

| Accident Insurance - 0% Increase | |
|----------------------------------|---------|
| Single | \$10.16 |
| Single plus Spouse | \$14.72 |
| Single plus children | \$18.01 |
| Family | \$27.54 |

The above premiums are monthly.

The Town does not contribute to voluntary dental, vision, LTD, STD, life, or accident insurance.

The Town does contribute 50% of the premium to the active town life insurance (\$10K).

The voluntary plans are only available to benefit eligible active employees.

9/29/2020