

**City of Waltham
Health Insurance
Employee/Retiree Rates
Effective June 2023 - May 2024**

	Employee/Retiree Contribution Percentage	6/1/22-5/31/23 Old Monthly Individual	6/1/23-5/31/24 New Monthly Family	6/1/22-5/31/23 Old Monthly Individual	6/1/23-5/31/24 New Monthly Family
<u>Active Employees</u>					
BCBS PPO	12.5%	\$201.18	\$207.99	\$467.50	\$482.82
Tufts EPO / Delta Dental	11.0%	\$105.67	\$109.36	\$284.01	\$293.45
Harvard HMO / Delta Dental	11.0%	\$107.21	\$114.26	\$268.19	\$285.30
<u>Retirees</u>					
BCBS Master Medical/Master Health Plus	1.0%	\$20.13	\$20.80	\$46.75	\$48.27
BCBS Master Medical/Master Health Plus	7.5%	\$150.96	\$155.99	\$350.64	\$362.03
BCBS Master Medical/Master Health Plus	12.5%	\$251.60	\$259.98	\$584.41	\$603.39
BCBS (Surviving Spouse) Master Medical/Master Health Plus	10.0%	\$201.28	\$207.99	\$467.52	\$482.71
BCBS PPO	1.0%	\$16.09	\$16.64	\$37.40	\$38.63
BCBS PPO	7.5%	\$120.71	\$124.80	\$280.50	\$289.69
BCBS PPO	12.5%	\$201.18	\$207.99	\$467.50	\$482.82
BCBS PPO (Surviving Spouse)	10.0%	\$160.94	\$166.40	\$374.00	\$386.25
Tufts EPO / Delta Dental	10.0%	\$96.06	\$99.42	\$258.19	\$266.78
Tufts EPO / Delta Dental	11.0%	\$105.67	\$109.36	\$284.01	\$293.45
Harvard HMO / Delta Dental	10.0%	\$97.47	\$103.87	\$243.81	\$259.36
Harvard HMO / Delta Dental	11.0%	\$107.21	\$114.26	\$268.19	\$285.30
<u>Medicare Supplement Plans</u>					
			Individual	Individual Plan x 2	
BCBS Medex	1.0%	\$5.79	\$5.51	\$11.02	
BCBS Medex	7.5%	\$43.46	\$41.32	\$82.65	
BCBS Medex	12.5%	\$72.43	\$68.87	\$137.75	
BCBS Medex (Surviving Spouse)	10.0%	\$57.94	\$55.10	\$110.20	
<u>Rates for these plans are updated annually on January 1st</u>					
			Individual 7/1/23-12/31/2023	Individual Plan x 2 7/1/23-12/31/2023	Individual 1/1/24-12/31/24
Tufts Medicare Preferred Medicare Supplement PDP	10.0%	N/A	\$43.10	\$86.20	\$44.50
Tufts Medicare Preferred Medicare Supplement PDP	11.0%	N/A	\$47.41	\$94.82	\$48.95
NOTE: Tufts Complement and Harvard Enhanced have been discontinued and the current plan is the Tufts Medicare Preferred Medicare Supplement PDP					
Tufts Medicare Preferred HMO	10.0%	\$37.10	\$39.10	\$78.20	\$39.70
Tufts Medicare Preferred HMO	11.0%	\$40.81	\$43.01	\$86.02	\$43.67

Retirees July 2008 to current have a contribution percentage rate of 11% or 12.5%, Surviving Spouse contribution rate is 10%