



THE COMMONWEALTH OF MASSACHUSETTS
COUNTY OF PLYMOUTH
 OFFICE OF THE COUNTY COMMISSIONERS

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DANIEL A. PALLOTTA
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 HANOVER

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EFFECTIVE JULY 1, 2016 NEW HEALTH/DENTAL INSURANCE RATES: EMPLOYEES

	<u>EMPLOYEE SHARE</u>	<u>COUNTY SHARE</u>	<u>PEMBROKE</u>	<u>TOTAL</u>
	<u>25%</u>	<u>75%</u>		
ACTIVE EMPLOYEE RATES:				
BLUE CROSS BLUE CARE ELECT PREFERRED (PPO) INDIVIDUAL	\$ 264.24	\$ 792.76		\$ 1,057.00
BLUE CROSS BLUE CARE ELECT PREFERRED (PPO) FAMILY	\$ 626.50	\$ 1,879.50		\$ 2,506.00
BLUE CROSS BLUE CARE ELECT RATE SAVER PLAN INDIVIDUAL	\$ 259.00	\$ 777.00		\$ 1,036.00
BLUE CROSS BLUE CARE ELECT RATE SAVER PLAN FAMILY	\$ 614.00	\$ 1,842.00		\$ 2,456.00
BLUE CROSS BLUE CARE ELECT BENCHMARK PLAN INDIVIDUAL	\$ 241.50	\$ 724.50		\$ 966.00
BLUE CROSS BLUE CARE ELECT BENCHMARK PLAN FAMILY	\$ 573.00	\$ 1,719.00		\$ 2,292.00
BLUE CROSS NETWORK BLUE INDIVIDUAL	\$ 186.24	\$ 558.76		\$ 745.00
BLUE CROSS NETWORK BLUE FAMILY	\$ 496.50	\$ 1,489.50		\$ 1,986.00
BLUE CROSS NETWORK BLUE RATE SAVER INDIVIDUAL	\$ 178.00	\$ 534.00		\$ 712.00
BLUE CROSS NETWORK BLUE RATE SAVER FAMILY	\$ 474.50	\$ 1,423.50		\$ 1,898.00
BLUE CROSS NETWORK BLUE BENCHMARK PLAN INDIVIDUAL	\$ 170.50	\$ 511.50		\$ 682.00
BLUE CROSS NETWORK BLUE BENCHMARK PLAN FAMILY	\$ 454.24	\$ 1,362.76		\$ 1,817.00
HARVARD PILGRIM HMO INDIVIDUAL	\$ 201.00	\$ 603.00		\$ 804.00
HARVARD PILGRIM HMO FAMILY	\$ 535.24	\$ 1,605.76		\$ 2,141.00
HARVARD PILGRIM RATE SAVER INDIVIDUAL	\$ 192.00	\$ 576.00		\$ 768.00
HARVARD PILGRIM RATE SAVER FAMILY	\$ 511.24	\$ 1,533.76		\$ 2,045.00
HARVARD PILGRIM BENCHMARK PLAN INDIVIDUAL	\$ 184.00	\$ 552.00		\$ 736.00
HARVARD PILGRIM BENCHMARK PLAN FAMILY	\$ 490.00	\$ 1,470.00		\$ 1,960.00
DELTA DENTAL INDIVIDUAL	\$ 6.99	\$ 20.96		\$ 27.95
DELTA DENTAL FAMILY	\$ 26.29	\$ 78.88		\$ 105.17
RETIREE RATES: (Medicare part A & B enrolled)				
MEDEX III	\$ 109.25	\$ 327.75		\$ 437.00
HPHC MEDICARE ENHANCE	\$ 120.75	\$ 362.25		\$ 483.00