

GIC Health Plan Rates
MONTHLY RATES AS OF JULY 1, 2021
FOR THE CITY OF NORTHAMPTON ENROLLEES
INCLUDING THE 0.35% ADMINISTRATIVE FEE

Active Employees, Retirees and Survivors without Medicare
Chart shows Employee's Portion on a monthly basis (taken in bi-weekly amts)

HEALTH PLAN	PLAN TYPE	% paid by employee	Individual Coverage	Family Coverage
Fallon Health Direct Care ***	HMO	20%	127.50	322.34
Fallon Health Select Care	HMO	20%	172.60	420.12
Harvard Pilgrim Independence Plan	POS	50%	482.12	1,178.08
Harvard Pilgrim Primary Choice Plan	HMO	20%	139.58	356.40
Health New England	HMO	20%	126.06	300.90
Allways Health Partners**	HMO	20%	153.58	401.14
Tufts Health Plan Navigator	POS	50%	418.32	1,022.98
Tufts Health Plan Spirit***	HMO-type	20%	127.74	308.38
UniCare State Indemnity Plan/Basic with CIC (Comprehensive)	Indemnity	50%	602.08	1,337.06
UniCare State Indemnity Plan/Basic without CIC (Non-Comprehensive)	Indemnity	50%	571.78	1,268.08
UniCare State Indemnity Plan/Community Choice	PPO-type	50%	296.92	737.92
UniCare State Indemnity Plan/PLUS	PPO-type	50%	391.00	933.36

***Note –Allways Health Partners is not available to residents of Hampshire County. ***-Fallon Direct Care and Tufts Health Plan Spirit are available to residents of select municipalities within Hampshire county*

Retirees and Survivors with Medicare

HEALTH PLAN	PLAN TYPE	% paid by enrollee	Retiree/Survivor or Pays Per Person Individual Coverage
Tufts Health Plan Medicare Preferred	Medicare (HMO)	20%	66.54
Harvard Pilgrim Medicare Enhance	Medicare (Indemnity)	50%	206.71
Health New England Medicare Supplement Plus	Medicare (Indemnity)	50%	207.09
Tufts Health Plan Medicare Complement	Medicare (Indemnity)	50%	196.30
UniCare State Indemnity Plan/Medicare Extension (OME) with CIC (Comprehensive)	Medicare (Indemnity)	50%	204.42
UniCare State Indemnity Plan/Medicare Extension (OME) without CIC (Non-Comprehensive)	Medicare (Indemnity)	50%	198.56