

GIC Health Plan Rates
MONTHLY RATES AS OF JULY 1, 2022
FOR THE CITY OF NORTHAMPTON ENROLLEES
INCLUDING THE 0.30% 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
Harvard Pilgrim Independence Plan	POS	50%	518.02	1,267.32
Harvard Pilgrim Primary Choice Plan	HMO	20%	149.34	381.92
Health New England	HMO	20%	133.94	320.44
Allways Health Partners**	HMO	20%	168.88	442.34
Tufts Health Plan Navigator	POS	50%	445.58	1091.58
Tufts Health Plan Spirit***	HMO-type	20%	135.14	326.92
UniCare State Indemnity Plan/Basic with CIC (Comprehensive)	Indemnity	50%	619.54	1,376.34
UniCare State Indemnity Plan/Basic without CIC (Non-Comprehensive)	Indemnity	50%	589.96	1,308.98
UniCare State Indemnity Plan/Community Choice	PPO-type	50%	311.92	776.72
UniCare State Indemnity Plan/PLUS	PPO-type	50%	405.70	969.38

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

Retirees and Survivors with Medicare

HEALTH PLAN	PLAN TYPE	% paid by enrollee	Retiree/Survivor Pays Per Person Individual Coverage
Tufts Health Plan Medicare Preferred	Medicare (HMO)	20%	69.08
Harvard Pilgrim Medicare Enhance	Medicare (Indemnity)	50%	211.99
Health New England Medicare Supplement Plus	Medicare (Indemnity)	50%	215.15
Tufts Health Plan Medicare Complement	Medicare (Indemnity)	50%	203.01
UniCare State Indemnity Plan/Medicare Extension (OME) with CIC (Comprehensive)	Medicare (Indemnity)	50%	206.69
UniCare State Indemnity Plan/Medicare Extension (OME) without CIC (Non-Comprehensive)	Medicare (Indemnity)	50%	201.01