

GROUP INSURANCE RATES – FY2023

Plan Type	Current Rates	New Rates	ACTIVE FY23 Employee Monthly Rate	
HEALTH INSURANCE: BLUE CROSS BLUE SHIELD July 1, 2022 – June 30, 2023				
<u>Network Blue New England (HMO)</u>				
Employee Only	\$620.60	\$620.60	\$ 217.21	
Employee Plus One	\$1445.20	\$1445.20	\$ 505.82	
Family	\$1781.52	\$1781.52	\$ 623.53	
<u>Blue Care Elect Preferred (PPO)</u>				
Employee Only	\$715.24	\$715.24	\$ 250.33	
Family	\$1953.40	\$1953.40	\$ 683.69	
DENTAL INSURANCE: GUARDIAN (\$1000 Plan) July 1, 2022 to June 30, 2024				
<u>Value PPO Plan</u>	Employee	\$26.26	\$26.26	\$ 26.26
	Employee + 1	\$51.82	\$51.82	\$ 51.82
	Family	\$96.84	\$96.84	\$ 96.84
<u>Advantage PPO Plan</u>	Employee	\$47.65	\$47.65	\$ 47.65
	Employee + 1	\$90.44	\$90.44	\$ 90.44
	Family	\$140.01	\$140.01	\$140.01
VISION INSURANCE: BCBS BLUE 20/20 with Hearing Benefits thru Amplifon Hearing Open to All Employees (Active and Retired), with or without enrolling in health insurance				
<u>Blue 20/20 – Insight Network</u>			Monthly Employee	
<u>Integrated Plan (Option #2)</u>			Rate	
Individual			\$ 6.08	
Employee +Spouse			\$10.33	
Employee + one or more children			\$10.64	
Family			\$16.71	
LIFE INSURANCE: BOSTON MUTUAL (\$5000 Plan) July 1, 2022 to June 30, 2024				
Basic Coverage	\$1.39/\$1000	\$1.39/\$1000	Active Emp/Monthly \$ 2.49 Combined	
Accidental Death & Dismemberment	\$.03/\$1000	\$.03/\$1000		