

## GIC Health Plan Rates

***Bi-Weekly Rates for coverage as of July 1, 2021***  
***FOR THE CITY OF HAVERHILL – SCHOOL DEPARTMENT ENROLLEES***

### ***Active Employees***

		Employees Hired in a benefits eligible position <u>PRIOR</u> to <u>07/01/2011</u> Pay a <u>25%</u> Contribution Rate <b style="color: red;">Deductions taken from 20 paychecks</b>		Employees Hired in a benefits eligible position <u>ON</u> or <u>AFTER</u> <u>07/01/2011</u> Pay a <u>30%</u> Contribution Rate <b style="color: red;">Deductions taken from 20 paychecks</b>	
HEALTH PLAN	PLAN TYPE	INDIVIDUAL	FAMILY	INDIVIDUAL	FAMILY
Fallon Health Direct Care	HMO	95.63	241.76	114.75	290.11
Fallon Health Select Care	HMO	129.45	315.09	155.34	378.10
Harvard Pilgrim Independence Plan	POS	144.64	353.42	173.57	424.10
Harvard Pilgrim Primary Choice Plan	HMO	104.69	267.29	125.63	320.75
Health New England	HMO	94.55	225.67	113.46	270.80
AllWays Health Partners	HMO	115.19	300.85	138.23	361.02
Tufts Health Plan Navigator	POS	125.50	306.89	150.60	368.27
Tufts Health Plan Spirit	HMO-type	95.81	231.29	114.97	277.54
UniCare State Indemnity Plan/Basic with CIC (Comprehensive)	Indemnity	180.63	401.12	216.75	481.34
UniCare State Indemnity Plan/Basic without CIC (Non-Comprehensive)	Indemnity	171.54	380.42	205.84	456.51
UniCare State Indemnity Plan/Community Choice	PPO-type	89.07	221.38	106.89	265.65
UniCare State Indemnity Plan/PLUS	PPO-type	117.30	280.01	140.76	336.01

Rates are calculated by the City of Haverhill School Department Benefits Office

RATE QUESTIONS? Contact: Jennifer Schmidt, Benefits Specialist, (978) 420-1964 or [jennifer.schmidt@haverhill-ps.org](mailto:jennifer.schmidt@haverhill-ps.org)