GIC Health Plan Rates

Bi-Weekly Rates for coverage as of July 1, 2022 FOR THE CITY OF HAVERHILL – SCHOOL DEPARTMENT ENROLLEES

Active Employees

		Employees Hired in a benefits eligible position PRIOR to 07/01/2011 Pay a 25% Contribution Rate Deductions taken from		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 <u>Deductions taken from</u>	
		20 paychecks		20 paychecks	
HEALTH PLAN	PLAN TYPE	INDIVIDUAL	FAMILY	INDIVIDUAL	FAMILY
Harvard Pilgrim Independence Plan	POS	155.40	380.19	186.49	456.23
Harvard Pilgrim Primary Choice Plan	НМО	112.01	286.44	134.41	343.72
Health New England	НМО	100.46	240.32	120.55	288.38
AllWays Health Partners	НМО	126.67	331.75	152.00	398.10
Tufts Health Plan Navigator	POS	133.67	327.47	160.41	392.97
Tufts Health Plan Spirit	HMO- type	101.36	245.18	121.63	294.22
UniCare State Indemnity Plan/Basic with CIC (Comprehensive)	Indemnity	185.86	412.90	223.04	495.48
UniCare State Indemnity Plan/Basic without CIC (Non-Comprehensive)	Indemnity	176.99	392.69	212.39	471.23
UniCare State Indemnity Plan/Community Choice	PPO-type	93.57	233.01	112.29	279.61
UniCare State Indemnity Plan/PLUS	PPO-type	121.71	290.81	146.05	348.98

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