

GIC Health Plan Rates

Bi-Weekly Rates for coverage as of July 1, 2023
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 25% Contribution Rate Deductions taken from 20 paychecks		Employees Hired in a benefits eligible position <u>ON</u> or <u>AFTER</u> <u>07/01/2011</u> Pay a 30% Contribution Rate Deductions taken from 20 paychecks	
HEALTH PLAN	PLAN TYPE	INDIVIDUAL	FAMILY	INDIVIDUAL	FAMILY
Harvard Pilgrim Health Care Explorer	POS	146.03	360.85	175.23	433.02
Harvard Pilgrim Primary Care Quality	HMO	107.88	273.57	129.45	328.28
Health New England	HMO	109.92	262.85	131.90	315.42
Mass General Brigham Health Plan – Complete	HMO	133.47	351.81	160.17	422.17
UniCare Total Choice	Indemnity	201.66	446.14	241.99	535.37
Harvard Pilgrim Health Care – Access America	PPO	176.53	393.18	211.84	471.81
UniCare State Indemnity Plan/Community Choice	PPO-type	101.21	249.63	121.45	299.55
UniCare State IndemnityPlan/PLUS	PPO-type	132.20	313.76	158.64	376.51

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
