

The new rates take effect in June, for coverages effective July 1, 2024

Town of Harvard Health Plans: FY25

		FY25 MONTHLY TOTAL COST <i>Town + Employee</i>	FY25 MONTHLY Retiree pays <i>WRRS retirees & MTRS retirees</i>	FY25 Bi-weekly* Employee pays <i>30% Premium Groups</i>	FY25 Bi-weekly* Employee pays <i>Split Premium Groups</i>	
HMO Plans			30% Premium	30% Premium	20% Premium	25% Premium
HMO Blue New England	<i>Individual</i>	\$904.35	\$271.31	\$135.65	\$90.44	\$113.04
HMO Blue New England	<i>Family</i>	\$2,455.82	\$736.75	\$368.37	\$245.58	\$306.98
HMO Blue Select	<i>Individual</i>	\$752.16	\$225.65	\$112.82	\$75.22	\$94.02
HMO Blue Select	<i>Family</i>	\$2,042.55	\$612.77	\$306.38	\$204.26	\$255.32
PPO Plans			50% Premium	50% Premium	50% Premium	50% Premium
PPO Blue Care Elect	<i>Individual</i>	\$1,130.43	\$565.22	\$282.61	\$282.61	\$282.61
PPO Blue Care Elect	<i>Family</i>	\$3,069.77	\$1,534.89	\$767.44	\$767.44	\$767.44

* Deducted for 24 of the 26 pay periods