

**GIC Health Plan Rates  
MONTHLY RATES AS OF JULY 1, 2024  
FOR THE CITY OF HAVERHILL ENROLLEES**

**RETIRED EMPLOYEES/SURVIVORS  
NON-MEDICARE ELIGIBLE**

HEALTH PLAN	PLAN TYPE	For Retirees <u>PRIOR</u> to 05/01/2008 15%		For Retirees <u>ON</u> or <u>AFTER</u> 05/01/2008 20%		Indemnity/POS/PPO Plans 25%	
		INDIVIDUAL	FAMILY	INDIVIDUAL	FAMILY	INDIVIDUAL	FAMILY
Harvard Pilgrim HC Explorer	POS					\$266.97	\$661.48
Harvard Pilgrim HC Quality	HMO	\$118.21	\$300.87	\$157.61	\$401.16		
Health New England	HMO	\$116.74	\$280.04	\$155.65	\$373.39		
MGB Complete	HMO	\$146.65	\$387.81	\$195.53	\$517.08		
Wellpoint Total Choice	Indemnity					\$375.34	\$832.93
Wellpoint Community Choice	PPO-type					\$186.24	\$462.27
Wellpoint Plus	PPO-type					\$239.65	\$571.01
Harvard Pilgrim Health Care Access America	NATIONAL					\$314.85	\$702.32

**RETIRED EMPLOYEES/SURVIVORS  
MEDICARE ELIGIBLE**

HEALTH PLAN	PLAN TYPE	For Retirees <u>PRIOR</u> to 05/01/2008 15% (PER PERSON)	For Retirees <u>ON</u> or <u>AFTER</u> 05/01/2008 20% (PER PERSON)	Indemnity Plans 25% (PER PERSON)
Harvard Pilgrim HC Enhance	Medicare (Indemnity)			\$109.03
Health New England Medicare Supplement Plus	Medicare (Indemnity)			\$109.70
Tufts Medicare Preferred	Medicare (HMO)	\$54.58	\$72.77	
Wellpoint Medicare Extension	Medicare (Indemnity)			\$111.17

*Rates are calculated by the City of Haverhill*

**RATE QUESTIONS? CALL: Human Resources (978) 374-2357**