Town of Norton
Health Insurance Rates for Retirees

Fiscal Year 2019 (07/01/18 - 06/30/19)

Blue Cross HMO Plan

(Note: The HMO Plan requires selection of a Primary Care Physician)

HMO Blue New England (Deductible Plan)

PLAN	25% Retiree Share	75% Town Share	Total Premium
SINGLE	$ 193.25	$ 579.75	$ 773.00
FAMILY	$ 505.75	$ 1,517.25	$ 2,023.00

Blue Cross PPO Plans

(Note: PPO Plan does NOT require selection of a Primary Care Physician)

BCBS Blue Care Elect Deductible Plan

PLAN	30% Retiree Share	70% Town Share	Total Premium
SINGLE	$ 399.00	$ 931.00	$ 1,330.00
FAMILY	$ 993.00	$ 2,317.00	$ 3,310.00

Blue Cross Medicare Supplemental Plans

PLAN	25% Retiree Share	75% Town Share	Total Premium
MEDEX w/PDP**	$ 93.79	$ 281.37	$ 375.16
Managed Blue w/ PDP **	$ 82.08	$ 246.25	$ 328.33
Medex - LIS	$ 58.69	$ 281.37	$ 340.06
Managed Blue - LIS	$ 47.08	$ 246.25	$ 293.33

** Please note these rates are now on a calendar year 1/1/2018-12/31/2018

DMS DENTAL PLAN		ALTUS (no longer accepting new enrollments)	
	Cost per month	Cost per month	
		Low Option	High Option
Employee	$ 21.00	$ 46.72	$ 56.16
Emp Plus One	$ 41.40	$ 89.66	$ 107.76
Full Family	$ 59.60	$ 129.24	$ 155.40

******* PLEASE NOTE ALL SELF PAY PREMIUMS ARE DUE ONE MONTH IN ADVANCE