TOWN OF STOW

HEALTH INSURANCE RATES EFFECTIVE 01-01-2022

MEDICARE SUPPLEMENT PLANS FOR RETIREES WITH MEDICARE PART A & PART B

HEALTH PLAN NAME	Monthly Premium	Monthly Retiree Share
Fallon Medicare Plus Premier	\$328.00	\$98.40
(Medicare Advantage Plan)	Surviving Spouse amt	\$164.00
Fallon Medicare Plus Central Premier	\$243.00	\$72.90
(Medicare Advantage Plan)	Surviving Spouse amt	\$121.50
Tufts Medicare Preferred HMO (Medicare Advantage Plan)	\$356.00	\$106.80
	Surviving Spouse amt	\$178.00
Tufts Medicare Preferred Supplement with PDP Plus	\$420.00	\$126.00
	Surviving Spouse amt	\$210.00
BC/BS Dental Blue		
Individual	\$60.66	\$30.33
Family	\$157.35	\$78.68

OPEN ENROLLMENT PERIOD - NOVEMBER 1, 2021 - NOVEMBER 30, 2021 All changes made during open enrollment will be effective January 1, 2022

Asst Town Administrator/HR Director's Office 978-897-4175
Treasurer/Collector's Office 978-897-2834