

## FY 23 Health Insurance Plans

Traditional Health Plans			Monthly Premium	Monthly Town Share	Monthly Employee Share	Weekly Payroll Deduction
<b>Tufts Health Plan - EPO</b> 16208-120	<b>70/30</b>	Individual	\$952.00	\$666.40	\$285.60	\$71.40
		Family	\$2,584.00	\$1,808.80	\$775.20	\$193.80
<b>Tufts Total Health Plan - POS</b>	<b>50/50</b>	Individual	\$2,678.00	\$1,339.00	\$1,339.00	\$334.75
		Family	\$7,066.00	\$3,533.00	\$3,533.00	\$883.25
<b>Harvard Pilgrim Health Care - EP</b> 287170025	<b>70/30</b>	Individual	\$1,030.00	\$721.00	\$309.00	\$77.25
		Family	\$2,708.00	\$1,895.60	\$812.40	\$203.10
<b>BCBS-HMO Blue New England</b> 00-4069784	<b>70/30</b>	Individual	\$883.00	\$618.10	\$264.90	\$66.23
		Family	\$2,357.00	\$1,649.90	\$707.10	\$176.77
<b>BCBS HMO-SELECT Limited</b> 00-4069823	<b>70/30</b>	Individual	\$821.00	\$574.70	\$246.30	\$61.57
		Family	\$2,196.00	\$1,537.20	\$658.80	\$164.70
<b>Delta Dental</b>	<b>50/50</b>	Individual	\$51.43	\$25.72	\$25.72	\$6.43
		Family	\$133.41	\$66.71	\$66.71	\$16.68
<b>EyeMed</b>		Individual	\$7.34			\$1.84
		Ind & Spouse	\$13.96			\$3.49
		Ind & Child	\$14.69			\$3.67
		Ind & Family	\$21.60			\$5.40
High Deductible - HSA qualified plans	Town Contribution to HSA		Monthly Premium	Monthly Town Share	Monthly Employee Share	Weekly Payroll Deduction
<b>Tufts HMO HSAQ</b> 54707-120	\$1,000	Individual	\$781.00	\$546.70	\$234.30	\$58.57
	\$2,000	Family	\$2,118.00	\$1,482.60	\$635.40	\$158.85
<b>Harvard HMO HSAQ</b> 747480025	\$1,000	Individual	\$813.00	\$569.10	\$243.90	\$60.97
	\$2,000	Family	\$2,140.00	\$1,498.00	\$642.00	\$160.50
<b>BCBS HMO HSQA</b>	\$1,000	Individual	\$723.00	\$506.10	\$216.90	\$54.22
	\$2,000	Family	\$1,932.00	\$1,352.40	\$579.60	\$144.90

**Questions?** Please check our website <https://www.stow-ma.gov/human-resources> or come to the Health Fair on May 4th 11:30 AM to 1 PM or email [assttownadmin@stow-ma.gov](mailto:assttownadmin@stow-ma.gov)