

GIC Health Plan Rates for LABBB Collaborative Employees
Monthly & Bi-Weekly Rates as of July 1, 2019 through June 30, 2020

| 2019 - 2020 Health Plans | Total Monthly Premium | | EE % | Individual Coverage | | Family Coverage | |
|---|-----------------------|-------------|--------|---------------------|----------------|-----------------|----------------|
| | Individual | Family | | Monthly Cost | Bi-Weekly Rate | Monthly Cost | Bi-Weekly Rate |
| AllWays Health Partners Complete HMO | \$ 646.93 | \$ 1,677.69 | 17.50% | \$ 113.21 | \$ 52.25 | \$ 293.60 | \$ 135.51 |
| Fallon Health Direct Care | \$ 600.68 | \$ 1,514.23 | 17.50% | \$ 105.12 | \$ 48.52 | \$ 264.99 | \$ 122.30 |
| Fallon Health Select Care | \$ 811.79 | \$ 1,971.89 | 17.50% | \$ 142.06 | \$ 65.57 | \$ 345.08 | \$ 159.27 |
| Harvard Pilgrim Independence Plan | \$ 889.65 | \$ 2,171.49 | 17.50% | \$ 155.69 | \$ 71.86 | \$ 380.01 | \$ 175.39 |
| Harvard Pilgrim Primary Choice Plan | \$ 645.80 | \$ 1,646.48 | 17.50% | \$ 113.02 | \$ 52.16 | \$ 288.13 | \$ 132.98 |
| Health New England (HMO) | \$ 570.81 | \$ 1,356.54 | 17.50% | \$ 99.89 | \$ 46.10 | \$ 237.39 | \$ 109.57 |
| Tufts Health Plan Navigator | \$ 747.76 | \$ 1,822.08 | 17.50% | \$ 130.86 | \$ 60.40 | \$ 318.86 | \$ 147.17 |
| Tufts Health Plan Spirit | \$ 565.91 | \$ 1,358.94 | 17.50% | \$ 99.03 | \$ 45.71 | \$ 237.81 | \$ 109.76 |
| UniCare State Indemnity Plan/Basic with CIC (Comprehensive) (Indemnity) | \$ 1,086.10 | \$ 2,406.59 | 17.50% | \$ 190.07 | \$ 87.72 | \$ 421.15 | \$ 194.38 |
| UniCare State Indemnity Plan/Basic without CIC (Non-Comprehensive) (Indemnity) | \$ 1,034.54 | \$ 2,289.19 | 17.50% | \$ 181.04 | \$ 83.56 | \$ 400.61 | \$ 184.90 |
| UniCare State Indemnity Plan/Community Choice (PPO-TYPE) | \$ 517.51 | \$ 1,276.96 | 17.50% | \$ 90.56 | \$ 41.80 | \$ 223.47 | \$ 103.14 |
| UniCare State Indemnity Plan/PLUS (PPO-TYPE) | \$ 696.10 | \$ 1,654.60 | 17.50% | \$ 121.82 | \$ 56.22 | \$ 289.56 | \$ 133.64 |