

**TOWN OF CARLISLE HEALTH INSURANCE RATES
JULY 1, 2023 THROUGH JUNE 30, 2024**

EMPLOYEE HEALTH INSURANCE	FAMILY RATES	SINGLE RATES
PPO BLUE CARE ELECT 56% Town 44% Employee	\$627.44 bi-weekly	\$235.09 bi-weekly
HMO NETWORK BLUE 56% Town 44% Employee	\$501.95 bi-weekly	\$188.07 bi-weekly
HMO BLUE SELECT 56% Town 44% Employee	\$436.70 bi-weekly	\$163.62 bi-weekly
RETIREE HEALTH INSURANCE 56% Town 44% Retiree		
PPO BLUE CARE ELECT	\$1,254.88 per month	\$470.19 per month
HMO NETWORK BLUE	\$1,003.90 per month	\$327.25 per month
HMO BLUE SELECT	\$873.40 per month	\$376.15 per month
RETIREES 65+ AND ELIGIBLE FOR MEDICARE* *Rates below effective January 1, 2024		
Includes RX		
MEDEX 2	\$169.17 per month	
BCBS MANAGED BLUE SR	\$157.07 per month	
MEDICARE PPO ADVANTAGE	\$146.96 per month	

DENTAL - 100% Employee	FAMILY RATES	SINGLE RATES
High Option Blue Cross/Blue Shield Dental	\$69.20 bi-weekly	\$23.63 bi-weekly
Low Option Blue Cross/Blue Shield Dental	\$57.63 bi-weekly	\$18.37 bi-weekly

**BCBS MA VISION
100% Employee**

Bi-Weekly	
Individual	\$2.49
Employee + 1 Spouse	\$4.23
Employee + 1 or more children	\$4.36
Family	\$6.84

LIFE INSURANCE

THE HARTFORD LIFE **\$5,000.00**
50% Town 50% Employee

EMPLOYEES	\$0.93 bi-weekly
RETIREES	\$1.86 per month

Additional Life insurance is available to eligible active employees. Rate varies on benefit amount selected.