

Town of Millbury

Clerks, Custodians, Library Workers and Police Dispatchers
Department of Public Works, Sewer and Parks
Administrative Staff Millbury Town Hall and Millbury Public Schools Non Union
Millbury Teachers Association
Medical & Dental Rates

July 1, 2024

Employee Contribution 25%
Town Contribution 75%

Group # 004061346

MIIA Network Blue New England (HMO)

	Monthly Rate	Monthly COBRA	Bi-Weekly Deduction	21 Week Deduction
Employee	\$ 958.86	\$ 978.04	\$ 110.65	\$ 136.99
Family	\$ 2,515.23	\$ 2,565.54	\$ 290.23	\$ 359.32

Group # 002355209

MIIA Blue Care ELECT (PPO)

	Monthly Rate	Monthly COBRA	Bi-Weekly Deduction	21 Week Deduction
Employee	\$ 1,040.35	\$ 1,061.16	\$ 120.06	\$ 148.63
Family	\$ 2,729.01	\$ 2,783.60	\$ 314.90	\$ 389.86

Group # 004061349

MIIA Network Blue (HMO) SELECT

	Monthly Rate	Monthly COBRA	Bi-Weekly Deduction	21 Week Deduction
Employee	\$ 862.97	\$ 880.23	\$ 99.58	\$ 123.29
Family	\$ 2,263.71	\$ 2,308.99	\$ 261.20	\$ 323.39

**Group # 2363052
Dental Blue LOW**

	Monthly Rate	Monthly COBRA	Bi-Weekly Deduction	21 Week Deduction
Employee	\$ 37.61	\$ 38.37	\$ 17.36	\$ 21.50
Family	\$ 101.29	\$ 103.32	\$ 46.75	\$ 57.88

**Group # 2363055
Dental Blue HIGH**

	Monthly Rate	Monthly COBRA	Bi-Weekly Deduction	21 Week Deduction
Employee	\$ 42.94	\$ 43.80	\$ 19.82	\$ 24.54
Family	\$ 115.64	\$ 117.96	\$ 53.39	\$ 66.09

BLUE 20/20

	Member only	Member +1	Member + children	Member + family
VISION	\$ 7.28	\$ 13.66	\$ 14.06	\$ 22.09

Monthly deduction

The Town will continue to pay each and every \$1,500 inpatient co-pay for you and your dependents under the terms of the policy

YOU MAY CONTRIBUTE TO A FLEXIBLE SPENDING ACCOUNT IF YOU ARE HEALTH INSURANCE ELIGIBLE, WHETHER YOU HAVE THE TOWN'S HEALTH INSURANCE OR NOT.

YOU MAY SIGN UP FOR FLEXIBLE SPENDING ACCOUNTS UNTIL APRIL 30, 2024

Town of Millbury
 Clerks, Custodians, Library Workers and Police Dispatchers
 Department of Public Works, Sewer and Parks
 Millbury Teachers Association
 Medical & Dental Rates

**** New hires after August 2019**

July 1, 2024

Employee Contribution 30%
 Town Contribution 70%

Group # 004061346

MIIA Network Blue New England (HMO)

	Monthly Rate	Monthly COBRA	Annual Employee Contribution	Bi-Weekly Deduction	21 Week Deduction
Employee	\$ 958.86	\$ 978.04	\$ 3,451.90	\$ 132.77	\$ 164.38
Family	\$ 2,515.23	\$ 2,565.54	\$ 9,054.83	\$ 348.27	\$ 431.19

Group # 002355209

MIIA Blue Care Elect (PPO)

	Monthly Rate	Monthly COBRA	Annual Employee Contribution	Bi-Weekly Deduction	21 Week Deduction
Employee	\$ 1,040.35	\$ 1,061.16	\$ 3,745.26	\$ 144.05	\$ 178.35
Family	\$ 2,729.01	\$ 2,783.80	\$ 9,824.44	\$ 377.87	\$ 467.84

Group # 004061349

MIIA Network Blue (HMO) SELECT

	Monthly Rate	Monthly COBRA	Annual Employee Contribution	Bi-Weekly Deduction	21 Week Deduction
Employee	\$ 862.97	\$ 880.23	\$ 3,106.70	\$ 119.49	\$ 147.94
Family	\$ 2,263.71	\$ 2,308.99	\$ 8,149.36	\$ 313.44	\$ 388.07

Group # 2363052
Dental Blue LOW

	Monthly Rate	Monthly COBRA	Annual Employee Contribution	Bi-Weekly Deduction	21 Week Deduction
Employee	\$ 37.61	\$ 38.37	\$ 451.32	\$ 17.36	\$ 21.50
Family	\$ 101.29	\$ 103.32	\$ 1,215.48	\$ 46.75	\$ 57.88

Group # 2363055
Dental Blue HIGH

	Monthly Rate	Monthly COBRA	Annual Employee Contribution	Bi-Weekly Deduction	21 Week Deduction
Employee	\$ 42.94	\$ 43.80	\$ 515.28	\$ 19.82	\$ 24.54
Family	\$ 115.64	\$ 117.96	\$ 1,387.68	\$ 53.38	\$ 66.08

Blue 20/20

	Member only	Member +1	Member + children	Member + family
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VISION	\$ 7.28	\$ 13.66	\$ 14.06	\$ 22.09
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Monthly Deduction

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