

2023 Health Insurance Rates

Harvard Pilgrim Health Care Plan Choices	Total Monthly Premium	College Monthly Contribution	Employee Payroll Deductions	
			Weekly	Monthly
HMO – Individual	\$923.13	\$692.39	\$53.25	\$230.74
HMO – Family	\$2,501.69	\$1,876.40	\$144.30	\$625.29
HMO – Individual for \$45,000 ≤	\$923.13	\$738.54	\$42.60	\$184.59
HMO – Family for \$45,000 ≤	\$2,501.69	\$2,001.46	\$115.44	\$500.23
PPO Plus – Individual	\$784.65	\$608.14	\$40.73	\$176.51
PPO Plus – Family	\$2,125.67	\$1,647.50	\$110.35	\$478.17
PPO Plus – Individual for \$45,000 ≤	\$784.65	\$627.75	\$36.21	\$156.90
PPO Plus – Family for \$45,000 ≤	\$2,125.67	\$1,700.62	\$98.09	\$425.05

2023 Dental Insurance Rates

Delta Dental Plan Choices	Total Monthly Premium	College Monthly Contribution	Employee Payroll Deductions	
			Weekly	Monthly
PPO Plus Premier – Individual	\$53.85	\$43.08	\$2.49	\$10.77
PPO Plus Premier – Family	\$140.53	\$70.26	\$16.22	\$70.27
Delta Care – Individual	\$37.65	\$30.12	\$1.74	\$7.53
Delta Care – Family	\$93.06	\$46.53	\$10.74	\$46.53

2023 Vision Insurance Rates

EyeMed Vision Plan Choices	Total Monthly Premium	College Monthly Contribution	Employee Payroll Deductions 100% Employee Paid	
			Weekly	Monthly
Employee Only	\$6.18	\$0.00	\$1.43	\$6.18
Employee + Spouse	\$11.75	\$0.00	\$2.71	\$11.75
Employee + Child(ren)	\$12.37	\$0.00	\$2.85	\$12.37
Family	\$18.18	\$0.00	\$4.20	\$18.18