

GIC Health Plan Rates

MONTHLY RATES AS OF JULY 1, 2025

FOR THE CITY OF SOMERVILLE ENROLLEES

INCLUDING THE .25% ADMINISTRATIVE FEE

Active Employees, Retirees and Survivors without Medicare

Employee and Non-Medicare Retiree/ Survivor Rates					
PRODUCT CATEGORY	PRODUCT TYPE	HEALTH PRODUCT	Contribution Rate	Individual Coverage	Family Coverage
National Network	PPO	Harvard Pilgrim Access America	20%	\$287.72	\$641.76
Broad Network	INDEMNITY	Wellpoint Total Choice	25%	\$438.65	\$974.96
	PPO-TYPE	Wellpoint PLUS	20%	\$218.41	\$521.21
	POS	Harvard Pilgrim Explorer	20%	\$237.59	\$588.21
	HMO	Mass General Brigham Health Plan Complete	20%	\$218.29	\$576.92
Regional Network	HMO	Health New England	20%	\$171.87	\$412.23
Limited Network	PPO-TYPE	Wellpoint Community Choice	20%	\$167.48	\$416.26
	HMO	Harvard Pilgrim Quality	20%	\$177.13	\$450.50

Retirees and Survivors with Medicare

Medicare Plan Rates				
PRODUCT CATEGORY	PRODUCT TYPE	HEALTH PRODUCT	Contribution Rate	Individual Coverage
National Network - Medicare Supplement	INDEMNITY	Wellpoint Medicare Extension	25%	\$119.08
		Harvard Pilgrim Medicare Enhanced		\$117.06
		Health New England Medicare Supplement Plus		\$117.68
Limited Network - Medicare Advantage	HMO	Tufts Health Plan Medicare Preferred	20%	\$78.24

Rates are calculated by the City of Somerville Human Resources Department

**Rate questions?
CALL PERSONNEL: 617-625-6600 x3324**