

**MONTHLY HEALTH INSURANCE RATES EFFECTIVE 7/1/2017 – 6/30/2018 – REVISED 5/30/2017**

		Full Amount	Town Share	Employee Share	Bi-Weekly	School Year
<b>Employees:</b>						
Network Blue	Individual	\$780.00	\$492.18	\$287.82	\$143.91	\$215.87
VALUE						
Non GF	Family	\$2,046.00	\$1,254.20	\$791.80	\$395.90	\$593.85
Blue Care Elect	Individual	\$1,400.00	\$735.00	\$665.00	\$332.50	\$498.75
VALUE						
Non GF	Family	\$3,484.00	\$1,829.10	\$1,654.90	\$827.45	\$1,241.18
<b>Retirees:</b>						
Network Blue	Individual	\$780.00	\$390.00	\$390.00		
VALUE	Family	\$2,046.00	\$1,023.00	\$1,023.00		
Non GF						
Blue Care Elect	Individual	\$1,400.00	\$700.00	\$700.00		
VALUE	Family	\$3,484.00	\$1,742.00	\$1,742.00		
Non GF						

**Employees:**

Network Blue	Individual	\$736.00	\$464.42	\$271.58	\$135.79	\$203.69
DEDUCTIBLE						
	Family	\$1,927.00	\$1,181.25	\$745.75	\$372.87	\$559.31
Blue Care Elect	Individual	\$1,267.00	\$665.18	\$601.83	\$300.91	\$451.37
DEDUCTIBLE						
	Family	\$3,152.00	\$1,654.80	\$1,497.20	\$748.60	\$1,122.90
<b>Retirees:</b>						
Network Blue	Individual	\$736.00	\$368.00	\$368.00		
DEDUCTIBLE	Family	\$1,927.00	\$963.50	\$963.50		
Blue Care Elect	Individual	\$1,267.00	\$633.50	\$633.50		
DEDUCTIBLE	Family	\$3,152.00	\$1,576.00	\$1,576.00		

**MONTHLY HEALTH INSURANCE RATES EFFECTIVE 1/1/2017 – 12/31/2017**

Medex -		\$366.01	\$183.01	\$183.00		
Managed Blue -		\$321.01	\$160.51	\$160.50		