

# Retired Municipal Teacher (RMT) Health Insurance Rates



## How to Calculate Your Monthly Premium Effective July 1, 2019

1. Find the city, town or the school district from which you retired on the life insurance rate chart on reverse side.
2. Locate your "RMT Pays Monthly" rate for life insurance.
3. Add that amount to the "RMT Pays Monthly" rate below for the health plan you are interested in to determine your monthly combined life and health insurance premium.

		Retired Municipal Teachers (RMTs)			
		RMTs who retired on or before July 1, 1990 and SURVIVORS <sup>1</sup>		RMTs who retired after July 1, 1990	
		10%		15%	
		RMT PAYS MONTHLY		RMT PAYS MONTHLY	
MEDICARE					
HEALTH INSURANCE PRODUCTS	PLAN TYPE	PER PERSON COVERAGE		PER PERSON COVERAGE	
Tufts Health Plan Medicare Preferred	HMO	\$32.13		\$48.20	
Tufts Health Plan Medicare Complement	Indemnity	\$37.02		\$55.53	
Harvard Pilgrim Medicare Enhance	Indemnity	\$38.98		\$58.46	
Health New England Medicare Supplement Plus	Indemnity	\$39.04		\$58.57	
UniCare State Indemnity Plan/Medicare Extension (OME) with CIC <sup>2</sup> <i>(Comprehensive)</i>	Indemnity	\$45.76		\$64.51	
UniCare State Indemnity Plan/Medicare Extension (OME) without CIC <i>(Non-Comprehensive)</i>	Indemnity	\$35.50		\$54.25	
NON-MEDICARE					
HEALTH INSURANCE PRODUCTS	PLAN TYPE	INDIVIDUAL COVERAGE	FAMILY COVERAGE	INDIVIDUAL COVERAGE	FAMILY COVERAGE
UniCare State Indemnity Plan/Basic with CIC <sup>2</sup> <i>(Comprehensive)</i>	Indemnity	\$153.47	\$343.11	\$205.02	\$457.17
UniCare State Indemnity Plan/Basic without CIC <i>(Non-Comprehensive)</i>	Indemnity	\$102.09	\$226.12	\$153.64	\$340.18
UniCare State Indemnity Plan/PLUS	PPO-TYPE	\$69.37	\$164.88	\$104.05	\$247.32
Tufts Health Plan Navigator	POS	\$74.52	\$181.57	\$111.77	\$272.36
Fallon Health Select Care	HMO	\$80.90	\$196.50	\$121.34	\$294.75
Harvard Pilgrim Independence Plan	POS	\$88.66	\$216.39	\$132.98	\$324.59
Health New England	HMO	\$56.88	\$135.18	\$85.32	\$202.77
AllWays Health Partners Complete HMO	HMO	\$64.47	\$167.18	\$96.70	\$250.78
UniCare State Indemnity Plan/Community Choice	PPO-TYPE	\$51.57	\$127.25	\$77.36	\$190.88
Tufts Health Plan Spirit	EPO (HMO-TYPE)	\$56.39	\$135.42	\$84.59	\$203.13
Fallon Health Direct Care	HMO	\$59.86	\$150.90	\$89.79	\$226.34
Harvard Pilgrim Primary Choice Plan	HMO	\$64.36	\$164.07	\$96.53	\$246.11

<sup>1</sup> Survivors are not eligible for life insurance.

<sup>2</sup> CIC is an enrollee-pay-all benefit.

SEE OVER

# Retired Municipal Teacher (RMT) Life Insurance Rates



## Monthly GIC Plan Rates Effective July 1, 2019

BASIC LIFE INSURANCE	CITY/TOWN/SCHOOL DISTRICT (SD)		RMT PAYS MONTHLY
Basic Life: \$1,000 Coverage			\$0.80
Blackstone Valley Regional SD	Newbury	Plainville	
Bridgewater	Paxton	Salisbury	
Granby	Pioneer Valley Regional SD	Wilbraham	
Narragansett Regional SD			
Basic Life: \$2,000 Coverage			\$0.80
Barnstable	Quabbin Regional SD	Stoughton	
Dennis	Rehoboth	Upper Cape Cod Regional SD	
Martha's Vineyard Regional SD	Rockland	West Springfield	
Milton	Shawsheen Valley Regional SD	Whitman-Hanson SD	
Basic Life: \$4,000 Coverage			\$1.60
Rockport			
Basic Life: \$5,000 Coverage			\$2.00
Amesbury	Holyoke	Revere	
Billerica	Hudson	Rutland	
Bourne	Montague	Spencer	
Dedham	North Adams	Wareham	
Eastham	North Attleboro	West Bridgewater	
Everett	North Middlesex Regional SD	Westfield	
Greater Lawrence Regional SD	Norwell	Woburn	
Basic Life: \$10,000 Coverage			\$4.00
Braintree			



Commonwealth of Massachusetts  
Group Insurance Commission

Your  
Benefits  
Connection

SEE OVER