



Town of Leicester
OFFICE OF THE TREASURE/COLLECTOR
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 Leicester, MA 01524-1333
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FY25 HEALTH INSURANCE RATES
Effective July 1, 2024 through June 30, 2025

Non-Medicare Retirees

MIIA - BLUE CROSS BLUE SHIELD

	"TOTAL" MONTHLY PREMIUM	MONTHLY RETIREE CONTRIBUTION* 50%-TOWN/ 50%-RETIREE
<u>HMO - BLUE NE 1000</u>		
Individual	\$887.81	\$443.90
Family	\$2,295.76	\$1,147.88
<u>HMO - BLUE SELECT 1000</u>		
Individual	\$780.31	\$390.15
Family	\$2,016.82	\$1,008.41
<u>PPO BLUE ELECT 1000</u>		
Individual	\$1,010.96	\$505.48
Family	\$2,614.23	\$1,307.11
<u>*New* HMO - BLUE NE 2000 (High Deductible)</u>		
Individual	\$778.64	\$389.32
Family	\$2,013.45	\$1,006.72
<u>*New* HMO - BLUE SELECT 2000 (High Deductible)</u>		
Individual	\$677.41	\$338.70
Family	\$1,751.70	\$875.85

MIIA - DENTAL BLUE (BCBS)

Individual	\$52.39
Family	\$144.01

***New* MIIA - DENTAL BLUE (BCBS) - High Option**

Individual	\$55.18
Family	\$151.69

** The Dental plan is 100% EMPLOYEE Paid*

MIIA - VISION BLUE 20/20

Individual	\$6.77
EE+SP	\$11.51
EE+CH	\$11.85
Family	\$18.62

**The Vision plan is 100% employee paid*

For more information or details regarding the plans, please email your questions to: benefits@leicesterma.org