

**TOWN OF NATICK**  
**West Suburban Health Group**  
**Monthly Health/Dental Insurance Rates {July 1, 2009 through June 30, 2010}**

INSURANCE PLAN	Individual Plan					Family Plan				
	Total Cost	Town Contrib.	Town %	Employee Contrib.	Employee %	Total Cost	Town Contrib.	Town %	Employee Contrib.	Employee %
<b><u>Health Plans:</u></b>										
Harvard Pilgrim PPO	\$1,206.00	\$603.00	50.00%	\$603.00	50.00%	\$2,680.00	\$1,340.00	50.00%	\$1,340.00	50.00%
Tufts Point of Service	\$1,206.00	\$603.00	50.00%	\$603.00	50.00%	\$2,680.00	\$1,340.00	50.00%	\$1,340.00	50.00%
Harvard Pilgrim EPO	\$605.00	\$514.01	84.96%	\$90.99	15.04%	\$1,577.00	\$1,209.72	76.71%	\$367.28	23.29%
Network Blue	\$651.00	\$562.33	86.38%	\$88.67	13.62%	\$1,747.00	\$1,350.43	77.30%	\$396.57	22.70%
Tufts EPO	\$620.00	\$550.13	88.73%	\$69.87	11.27%	\$1,622.00	\$1,261.11	77.75%	\$360.90	22.25%
Fallon Group:										
Direct Care	\$496.00	\$446.40	90.00%	\$49.60	10.00%	\$1,341.00	\$1,072.80	80.00%	\$268.20	20.00%
Select Care	\$535.00	\$481.50	90.00%	\$53.50	10.00%	\$1,442.00	\$1,153.60	80.00%	\$288.40	20.00%
<b><u>Rate Saver EPO Plans</u></b>										
Blue Option Rate Saver	\$537.00	\$461.82	86.00%	\$75.18	14.00%	\$1,441.00	\$1,109.57	77.00%	\$331.43	23.00%
Fallon Direct Rate Saver	\$423.00	\$380.70	90.00%	\$42.30	10.00%	\$1,140.00	\$912.00	80.00%	\$228.00	20.00%
Fallon Select Rate Saver	\$455.00	\$409.50	90.00%	\$45.50	10.00%	\$1,226.00	\$980.80	80.00%	\$245.20	20.00%
Harvard Pilgrim Rate Saver	\$514.00	\$436.90	85.00%	\$77.10	15.00%	\$1,341.00	\$1,032.57	77.00%	\$308.43	23.00%
Tufts Navigator Rate Saver	\$526.00	\$468.14	89.00%	\$57.86	11.00%	\$1,379.00	\$1,075.62	78.00%	\$303.38	22.00%
<b><u>Senior Plans</u></b>										
Medex III	\$432.00	\$216.00	50.00%	\$216.00	50.00%					
HPHC Medicare Enhance	\$406.00	\$203.00	50.00%	\$203.00	50.00%					
Tufts Medicare Complment (TMC)	\$339.00	\$169.50	50.00%	\$169.50	50.00%					
Managed Blue for Seniors	\$386.39	\$193.20	50.00%	\$193.20	50.00%					
Tufts Medicare Preferred HMO	\$164.00	\$82.00	50.00%	\$82.00	50.00%					
Blue Medicare PFFS*	\$181.80	\$90.90	50.00%	\$90.90	50.00%					
Fallon Senior Plan*	\$213.00	\$106.50	50.00%	\$106.50	50.00%					
HP 1st Sen. Freedom PFFS*	\$245.00	\$122.50	50.00%	\$122.50	50.00%					
Medicare HMO Blue*	\$223.50	\$111.75	50.00%	\$111.75	50.00%					
Tufts Medicare Preferred PFFS	\$182.00	\$91.00	50.00%	\$91.00	50.00%					
<b><u>Dental Plan:</u></b>										
Delta Insurance	\$43.11		0.00%	\$43.11	100.00%	\$110.34		0.00%	\$110.34	100.00%

\*Rates change on January 1st (Senior Plans)

Note: For purposes of calculating rates town's portion was fixed as of 01/90