



**BI-WEEKLY MEDICAL/DENTAL INSURANCE
RATES EFFECTIVE JULY 1, 2022
FOR EMPLOYEES HIRED AFTER JULY 1, 2003**



Plans	42 Week (21 Pay Period Employee)	52 Week (26 Pay Period Employee)
Harvard Pilgrim Independence Plan		
Individual	\$148.00	\$119.54
Family	362.09	\$292.46
Harvard Pilgrim Primary Choice		
Individual	\$106.67	\$86.16
Family	\$272.80	\$220.34
Health New England		
Individual	\$95.67	\$77.27
Family	\$228.88	\$184.86
Allways Health Partners		
Individual	\$120.64	97.44
Family	\$315.95	255.19
Tufts Health Plan Navigator		
Individual	\$127.31	\$102.83
Family	\$311.88	\$251.90
Tufts Health Plan Spirit		
Individual	\$96.53	\$77.97
Family	\$233.51	\$188.60
Unicare State Indemnity Plan/Basic with CIC		
Individual	\$202.37	\$163.45
Family	\$450.97	\$364.24
Unicare State Indemnity Plan/Basic without CIC		
Individual	\$168.56	\$136.14
Family	\$373.99	\$302.07
Unicare State Indemnity Plan/Community Choice		
Individual	\$89.12	\$71.98
Family	\$221.92	\$179.24
Unicare State Indemnity Plan/PLUS		
Individual	115.91	\$93.62
Family	\$276.96	\$223.70