

City of Chicopee - Benefit Rates

NEW RATES FOR ACTIVE EFF 7/1/2019 - 6/30/2020

Based on a 26 week pay period.

HEALTH - Health New England

HNE Essential 3000 112632-0001	Individual	Family
Bi-Weekly Amount	90.57	325.94
Employee Contribute	181.14	651.87
City Contribute	422.65	977.81
COBRA 112632-0003	615.87	1,662.27

Individual plan: 3,000 deductible - You pay 500 - Health Equity pays 2,500. Family plan: 6,000 deductible - You pay 1,000 - Health Equity pays 5,000. Does not cover Co-Pays.

HNE Ess PPO 3000 112632-0006	Individual	Family
Bi-Weekly Amount	236.86	641.01
Employee Contribute	473.72	1,282.02
City Contribute	473.72	1,282.02
COBRA 112632-0007	966.39	2,615.31

Individual plan: 3,000 deductible - You pay 500 - Health Equity pays 2,500. Family plan: 6,000 deductible - You pay 1,000 - Health Equity pays 5,000. Does not cover Co-Pays.

HNE Wise Max 112632-0020	Individual	Family
Bi-Weekly Amount	68.35	272.75
Employee Contribute	136.71	545.51
City Contribute	318.98	818.26
COBRA 112632-0013	464.80	1,391.05

Individual plan: 2,000 deductible. Family plan: 4,000 deductible. Does not cover Co-Pays.

HEALTH - Blue Cross Blue Shield

HMO BLUE OPTIONS 2237844	Individual	Family
Bi-Weekly Amount	140.46	486.67
Employee Contribute	280.92	973.34
City Contribute	655.47	1,460.00
COBRA	955.12	2,482.01

Tier Based - No Deductable. Does not cover Co-Pays.

HMO BLUE 3000 4054902	Individual	Family
Bi-Weekly Amount	146.46	509.44
Employee Contribute	292.93	1,018.88
City Contribute	683.49	1,528.33
COBRA	995.95	2,598.15

Individual plan: 3,000 deductible - You pay 500 - Health Equity pays 2,500. Family plan: 6,000 deductible - You pay 1,000 - Health Equity pays 5,000. Does not cover Co-Pays.

DENTAL - Dental Blue

Dental Blue 2354318	Individual	Family
Bi-Weekly Amount	9.11	25.85
Employee Contribute	18.22	51.70
City Contribute	18.22	51.70
COBRA	37.17	105.47

Coverage limit 1,000 yearly.

VISION - EyeMED

EyeMED 9749649	Individual	Ind+1	Family
Bi-Weekly Amount	5.63	10.70	15.71
Employee Contribute	5.63	10.70	15.71
COBRA	5.74	10.91	16.02

City does not contribute.

LIFE INSURANCE - TheStandard - 20,000

20,000 Coverage.

Standard Life ACTIVE	Basic	Add Life
Employee Contribute	11.50	6.90 per 10,000
City Contribute	11.50	
Total Premium	23.00	

Spouse Life 10,000 Coverage	5.40
Dependent Life 5,000 Coverage	5.40

If **start date** is **1st - 9th** of the month; coverage effective date is 1st of the following month following hire date.

If **start date** is **10th - 31st** of the month; coverage effective date is 1st of the second month following hire date.

Benefit deductions are taken one month prior to coverage effective date.