



**BI-WEEKLY MEDICAL/DENTAL INSURANCE
RATES EFFECTIVE JULY 1, 2024
FOR EMPLOYEES HIRED AFTER JULY 1, 2003**



Plans	42 Week (21 Pay Period Employee)	52 Week (26 Pay Period Employee)
Harvard Pilgrim Health Care Access America		
Individual	\$179.91	\$145.31
Family	\$401.32	\$324.15
Harvard Pilgrim Health Care Explorer		
Individual	\$152.55	\$123.22
Family	\$377.99	\$305.30
Harvard Pilgrim Health Care Quality		
Individual	\$112.58	\$90.93
Family	\$286.54	\$231.44
Health New England		
Individual	\$111.18	\$89.80
Family	\$266.71	\$215.42
Mass General Brigham Health Plan Complete		
Individual	\$139.67	\$112.81
Family	\$369.35	\$298.32
Wellpoint Total Choice (Indemnity)		
Individual	\$214.48	\$173.23
Family	\$475.96	\$384.43
Wellpoint Community Choice		
Individual	\$106.42	\$85.96
Family	\$264.16	\$213.36
Wellpoint PLUS		
Individual	\$136.95	\$110.61
Family	\$326.29	\$263.54