

REVISED 4.1.2023 FINAL - FLEXIBLE BENEFIT RATES							
<i>(Effective January 1, 2023)</i>							
TOWN NON-UNION & AFSCME EMPLOYEES - 4.6% increase at 1.1.2023							
AB15/40IPDED HMO - \$1K/\$3KDed		85%	15%				2% ADMIN FEE
	MONTHLY RATE	TOWN'S SHARE	EE'S SHARE	TOWN BI/WKLY	EE BI/WKLY		COBRA
Single	\$ 1,017.83	\$ 865.16	\$ 152.67	\$ 432.58	\$ 76.34		\$ 1,038.19
2-Person	\$ 2,035.66	\$ 1,730.31	\$ 305.35	\$ 865.16	\$ 152.68		\$ 2,076.37
Family	\$ 2,748.14	\$ 2,335.92	\$ 412.22	\$ 1,167.96	\$ 206.11		\$ 2,803.10
AB SOS HMO - \$3K/\$9K Ded							
	MONTHLY RATE	TOWN'S SHARE	EE'S SHARE	TOWN BI/WKLY	EE BI/WKLY		COBRA
Single	\$ 692.30	\$ 692.30	\$ -	\$ 346.15	\$ -		\$ 706.15
2-Person	\$ 1,384.60	\$ 1,384.60	\$ -	\$ 692.30	\$ -		\$ 1,412.29
Family	\$ 1,869.21	\$ 1,869.21	\$ -	\$ 934.61	\$ -		\$ 1,906.59
TEAMSTER Effective 1/1/22 (85%/15% of Allegiant Care Plan Premium) - 4% increase							
PPO OPTION RATES		85%	15%				
	MONTHLY RATE	TOWN'S SHARE	EE'S SHARE	TOWN BI/WKLY	EE BI/WKLY		COBRA
Single	\$ 816.00	\$ 693.60	\$ 122.40	\$ 346.80	\$ 61.20		\$ 832.32
2-Person	\$ 1,715.00	\$ 1,457.75	\$ 257.25	\$ 728.88	\$ 128.63		\$ 1,749.30
Family	\$ 2,166.00	\$ 1,841.10	\$ 324.90	\$ 920.55	\$ 162.45		\$ 2,209.32
RETIREE INFORMATION							
RETIREE UNDER 65 - RESIDING WITHIN NEW ENGLAND							
See AB15/49 Plan or ABSOS PLAN INFORMATION (ABOVE)							
RETIREE UNDER 65 - RESIDING OUTSIDE OF NEW ENGLAND - Effective 1/1/23							
Single	\$ 996.37						
2-Person	\$ 1,992.74						
Family	\$ 2,690.20						
RETIREE 65 AND OVER - Effective 1/1/23							
MEDICAL AND PRESCRIPTION			\$ 791.85	PER PERSON			
MEDICAL ONLY (PRESCRIPTION ON MARKETPLACE)			\$ 327.34	PER PERSON			
NHRS Subsidy rates		NHRS Medicare		NHRS Non-Medicare			
Single		Single	\$ 236.84	Single	\$ 375.56		
2-Person		2-Person	\$ 473.68	2-Person	\$ 751.12		

HEALTH INSURANCE OPT OUT									
Town Opt Out 2023									
Cash back amount per year equal to forty (40%) percent of the Town's Annual Contribution to the basic, one person Plan-HMO Low									
Town Annual Contribution to Single Low HMO=\$865.16			\$ 10,381.92						
40% of Town's Annual Contribution			\$ 4,152.77						
Div by 24 pays			\$ 173.03						
AFSCME Opt Out 2023 EFFECTIVE 4/1/2023 (4/1/2023 - 12/31/2023)									
Cash back amount per year equal to forty (40%) percent of the Town's Annual Contribution to lowest HMO Single, 2 Person or Family level.									
			Single		2 Person		Family		
Opt Out 2023			\$ 3,500.00		\$ 7,000.00		\$ 10,000.00		
Div by 24 pays			\$ 145.83		\$ 291.67		\$ 416.67		
Teamster Opt Out ---- EFFECTIVE 4/1/2022									
Cash back amount per year equal to forty (40%) percent of the Town's Annual Contribution to the basic, one person or 2 person Teamster plan									
			Single		2 Person or Family				
Town Annual Contribution to Single Low HMO			\$ 8,323.20		\$ 17,493.00				
40% of Town's Annual Contribution			\$ 3,329.28		\$ 6,997.20				
Div by 24 pays			\$ 138.72		\$ 291.55				