## CITY OF REVERE RETIREE AND SURVIVING SPOUSE INSURANCE RATE\*

7/1/25 - 6/30/26

PROVIDER	TYPE	М	ONTHLY	CITY'S			RETIREE /			ELIGIBILITY
	OF		RATE	CON	ITRI	BUTION			SPOUSE	(per retirement date)
	PLAN		100%	М	ION <sup>.</sup>	THLY			<b>IBUTION</b>	
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Blue Choice	Individual	\$	1,869.34	75%	\$	1,402.01	25%	\$	467.34	all retirees and surviving spouses
	Family	\$	5,058.49	75%	\$	3,793.87	25%	\$	1,264.62	all retirees and surviving spouses
Network Blue Enhanced	Individual	\$	1,180.89	90%	\$	1,062.80	10%	\$	118.09	retired before 7/1/07
Network Blue Ellilanced	Family	\$	3,102.71	90%	\$	2,792.44	10%	\$	310.27	retired before 7/1/07
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Network Blue Enhanced	Individual	\$	1,180.89	77.5%	\$	915.19	22.5%	\$	265.70	retired on or after 7/1/07
	Family	\$	3,102.71	77.5%		2,404.60			698.11	retired on or after 7/1/07
Harvard Enhanced	Individual	\$	1,150.03	90%	\$	1,035.03	10%	\$	115.00	retired before 7/1/07
	Family	\$	3,071.84	90%	\$	2,764.66	10%	\$	307.18	retired before 7/1/07
Harvard Enhanced	Individual	\$	1,150.03	77.5%	\$	891.27	22.5%	\$	258.76	retired on or after 7/1/07
	Family	\$	3,071.84	77.5%	\$	2,380.68				retired on or after 71/107
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Dental Blue	Individual	\$	47.22	50%	\$	23.61	50%	\$	23.61	all retirees and surviving spouses
	Family	\$	110.98	50%	\$	55.49	50%	\$	55.49	all retirees and surviving spouses
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Managed Blue	Individual	\$	593.99	90%	\$	534.59	10%	\$		retired before 7/1/07
	2 Individuals	\$	1,187.98	90%	\$	1,069.18	10%	\$	118.80	retired before 7/1/07
Managed Blue	Individual	\$	593.99	80%	\$	475.19	20%	\$	118.80	retired on or after 7/1/07
	2 Individuals	\$	1,187.98	80%	\$	950.38	20%	\$		retired on or after 7/1/07
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Managed Blue	Individual	\$	593.99	77.5%		460.34			133.65	retired on or after 7/1/24
	2 Individuals	\$	1,187.98	77.5%	\$	920.68	22.5%	\$	267.30	retired on or after 7/1/24
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Medex	Individual	\$	921.59	75%	\$	691.19	25%	\$		all retirees and surviving spouses
	2 Individuals	\$	1,843.18	75%	\$	1,382.39	25%	\$	460.80	all retirees and surviving spouses

Boston Mutual Basic Life Insurance \$4.38/month

Direct Pay Subscribers: Payments are due on the 1st of the month preceding the month of coverage (payment for July is due June 1st). Make checks payable to City of Revere. Mail to Human Resources, City of Revere, 281 Broadway, Revere, MA 02151

<sup>\*</sup>Retired teachers are only eligible for Dental Blue (at the retiree contribution rate).