

Cape Cod Municipal Health Group

Approved FY12 Health and Dental Plan Rates eff. 7/1/11

ACTIVE EMPLOYEE HEALTH PLANS

Master Health Plus			
Proposed Funding Rates:	Individual	SP/SC	Family
	\$1,135	\$ 2,268	\$ 2,844
<i>Increase</i>	13.0%	13.0%	13.0%

Master Medical			
Proposed Funding Rates:	Individual	SP/SC	Family
	\$1,070	\$ 2,137	\$ 2,709
<i>Increase</i>	12.4%	12.4%	12.4%

Medicare Carveout A			
Proposed Funding Rates:	Individual	Frozen Enrollments	
	\$1,520		
<i>Increase</i>	12.0%		

	LEGACY Plans			RATE SAVER Plans		
	Individual	SP/SC	Family	<i>Blue Care Elect Pref. Rate Saver</i>		
Proposed Funding Rates:	Individual	SP/SC	Family	Individual	SP/SC	Family
Blue Care Elect Preferred	\$ 792	\$ 1,584	\$ 1,985	\$ 673	1,346	\$ 1,687
<i>Increase</i>	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%

	LEGACY Plans			RATE SAVER Plans		
	Individual	SP/SC	Family	<i>Network Blue NE Rate Saver</i>		
Proposed Funding Rates:	Individual	SP/SC	Family	Individual	SP/SC	Family
Network Blue NE	\$ 664	\$ 1,328	\$ 1,780	\$ 564	\$ 1,128	\$ 1,513
<i>Increase</i>	7.7%	7.7%	7.7%	7.8%	7.8%	7.8%

	LEGACY Plans		RATE SAVER Plans	
	Individual	Family	Individual	Family
Proposed Funding Rates:	Individual	Family	Individual	Family
Harvard Pilgrim EPO	\$ 614	\$ 1,644	\$ 522	\$ 1,397
<i>Increase</i>	10.2%	10.2%	10.2%	10.2%

	LEGACY Plans		RATE SAVER Plans	
	Individual	Family	Individual	Family
Proposed Funding Rates:	Individual	Family	Individual	Family
HARVARD PILGRIM - PPO	\$ 675	\$ 1,790	\$ 580	\$ 1,520
<i>Increase</i>	12.1%	12.1%	12.1%	12.1%

DENTAL PLANS

	Individual	Family
Delta Premier Contributory	\$34.00 0% inc.	\$ 96.00 0.9% inc.

	Individual	Family
Delta Voluntary plan	\$41.00 0% inc.	\$ 103.00 0% inc.

PLANS FOR MEDICARE ELIGIBLE RETIREES

Self-funded Medicare Supplement plans:	Individual	Renewal Date
Medex Standard	Individual	7/1/11
Proposed Funding Rates:	\$ 388	
<i>Increase</i>	6.9%	
BCBS - MEDEX III ENHANCED	Individual	7/1/11
Proposed Funding Rates:	\$ 440	
<i>Increase</i>	6.8%	
HPHC Medicare Enhance	Individual	7/1/11
Proposed Funding Rates:	\$ 395	
<i>Increase</i>	6.2%	

Insured HMO Medi-Gap plan:	Individual	Renewal Date
Managed Blue for Seniors	TBD	7/1/11
<i>Increase</i>		

Insured Medicare Advantage HMO:	Individual	Renewal Date
Medicare HMO Blue	\$ 357.89	1/1/11
<i>(Calendar year basis) Increase</i>	2.9%	

eff. 1/1/11

Insured Medicare Advantage HMO:	Individual	Renewal Date
Tufts Medicare Preferred HMO	TBD	7/1/11
<i>Increase</i>		

Insured Medicare PDP Plan:	Individual	Renewal Date
Tufts Medicare Prime Supplement Plan	TBD	7/1/11

VOLUNTARY VISION PLAN

	Individual	2-person	Family
EyeMed Vision Plan	\$ 7.57	\$ 14.39	\$ 21.12
<i>Increase</i>	0.0%	0.0%	0.0%