

**City of Worcester Medicare Supplement Plans
Effective January 1, 2025**

Retirees on Medicare Plans				
	Monthly Premium	City Share %	Monthly City Share	Monthly Employee Share
BCBS Medex II w/PDP				
1 person	\$415.00	75%	\$311.25	\$103.75
2 persons	\$830.00	75%	\$622.50	\$207.50
HPHC Medicare Enhance w/PDP				
1 person	\$385.00	75%	\$288.75	\$96.25
2 persons	\$770.00	75%	\$577.50	\$192.50
Tufts Medicare Preferred HMO Prime				
1 person	\$365.00	75%	\$273.75	\$91.25
2 persons	\$730.00	75%	\$547.50	\$182.50
Fallon Medicare Plus				
1 person	\$344.00	75%	\$258.00	\$86.00
2 persons	\$688.00	75%	\$516.00	\$172.00
Fallon Medicare Plus Central				
1 person	\$274.00	75%	\$205.50	\$68.50
2 persons	\$548.00	75%	\$411.00	\$137.00
BCBS Dental Blue Freedom - High Option (effective July 1, 2024)				
Retiree	\$41.47	0%	0%	\$41.47
Retiree plus One *	\$82.94	0%	0%	\$82.94
Family	\$124.32	0%	0%	\$124.32
BCBS Dental Blue Freedom - Low Option (effective July 1, 2024)				
Retiree	\$35.10	0%	0%	\$35.10
Retiree plus One *	\$70.17	0%	0%	\$70.17
Family	\$101.46	0%	0%	\$101.46
United Healthcare Vision				
Retiree	\$5.36	0%	0%	\$5.36
Ret & Dependent	\$10.72	0%	0%	\$10.72
Family	\$16.08	0%	0%	\$16.08

*** ONLY Retirees can have a 2-Person Dental Plan**

REV 10/2024