



City of Marlborough
Human Resources Department

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RETIREE HEALTH & DENTAL RATES

Effective July 1, 2023

TUFTS HEALTH PLAN

♦♦ (No increase in EPO, PPO Plans or Senior Plan rates from 2022!!!) ♦♦

Plan	Total Annual Plan Cost	Employee Monthly*	COBRA Plan Monthly*
PPO Ind.	\$14,171.89	\$472.40	\$1,204.61
PPO Fam.	\$37,146.14	\$1,238.20	\$3,157.42
EPO Ind.	\$11,560.68	\$289.02	\$982.66
EPO Fam.	\$30,207.63	\$755.19	\$2,567.65
Senior Plan • (With Medicare A&B)	\$5,043.45	\$168.12	\$428.69

- Once retired and eligible for Medicare A&B, you must enroll in it immediately!
- Contact our office to make an appointment as soon as you receive your Medicare A&B cards

Most Common Out -Of- Pocket Charges

EPO/PPO Plans	
Office Visit:	\$20 – Primary Care Doctor \$35 – Specialist
Emergency Room Visit:	\$100
High Tech Imaging:	\$50
Chiropractic:	\$20
Outpatient:	\$250 \$1,000/pp/outpatient max/yr.
Inpatient:	\$350 \$1,000/pp/inpatient max/yr.
Prescriptions:	\$10 / \$30 / \$50

Senior Plan (Medicare Complement Plan)	
Office Visit	\$15
Emergency Room Visit:	\$75
Outpatient:	\$150 \$500/pp/outpatient max/yr.
Inpatient:	\$250 \$1,000/pp/inpatient max/yr.
Prescriptions:	\$10 / \$30 / \$50

DELTA DENTAL PPO PLUS PREMIER PLAN

♦♦♦(No increase in rates from 2022!!!) ♦♦♦

Plan	Total Annual Plan Cost	Employee Monthly*	COBRA Plan Monthly*
Individual	\$649.38	\$27.06	\$55.20
Family	\$1,747.55	\$72.81	\$148.54

PLEASE REVIEW THE RETIREE ELIGIBILITY POLICY ON THE BACK OF THIS PAGE

OVER →→

* COBRA rates include 2% admin charge

City of Marlborough, Massachusetts

Human Resources Department

RETIREE ELIGIBILITY POLICY FOR GROUP HEALTH/DENTAL BENEFITS

Upon retirement, eligible individuals may participate in the City's contributory group health/dental benefit plans, to the extent allowed by the insurance provider, provided that they otherwise qualify under Massachusetts General Laws (MGL) Chapter 32B, and further provided that each of the following criteria applies:

- (a) The individual must have directly retired from active service with the City of Marlborough or Marlborough Public Schools (with no lapse in dates), and be receiving a retirement allowance in accordance with MGL Chapter 32 (except as specifically provided in MGL Chapter 32B, Section 9)
- (b) The individual must have been qualified and participating in the City's contributory group health/dental insurance program as an active employee of the City of Marlborough or Marlborough Public Schools, immediately preceding the date of retirement.
- (c) A retiree may not add a spouse and/or dependent to the plan if they were not enrolled with the employee at the time of retirement. Once retired, a retiree cannot add members to their coverage.
- (d) All participation in the City's contributory group health/dental insurance must be continuous. If a retiree cancels their enrollment or becomes ineligible for continued enrollment, they lose all eligibility to participate in the future--they cannot re-enroll at a future date regardless of the qualifying event or life changes.
- (e) **In accordance with MGL Chapter 32B, Section 18, individuals, their spouses and/or dependents must enroll in Medicare A&B as soon as they are eligible. Failure to enroll in Medicare A&B when first eligible will jeopardize future participation the City's insurance plans.**
- (f) If a retiree becomes divorced, the ex-spouse is no longer eligible to be covered under the City's group health/dental plans. Failure to notify the HR Department of this change will result in the employee being responsible for 100% of all costs (medical, dental and/or prescription) incurred by the City from the date of the dependent's ineligibility.
- (g) If a single retiree or a divorced retiree marries, their spouse is not eligible for coverage under the City's contributory group health/dental insurance program.
- ➔ (h) A retiree of the City of Marlborough and Marlborough Public Schools **MUST** notify both the City's Human Resources Department **and** their respective Retirement Board (Marlborough Retirement Board or the Massachusetts Teachers Retirement System) **in writing within thirty (30) days of any address or marital status change**.

Surviving Spouse Eligibility

The surviving spouse of a deceased active employee or deceased retiree is eligible to continue coverage at the same contribution rate as other retirees in the same health/dental plan. The surviving spouse's medical/dental eligibility ends when they remarry. If a surviving spouse fails to notify the HR Department of their remarriage, this surviving spouse will be responsible for 100% of all costs (medical, dental and/or prescription) incurred by the City from the date of their ineligibility.

If a surviving spouse cancels their enrollment or becomes ineligible for continued enrollment, they lose all eligibility to participate in the future – they cannot re-enroll at a future date regardless of the qualifying event or life changes.

Summary of Benefits & Coverage

Federal law mandates all employees be notified that their health insurance Summary of Benefits & Coverage (SBC) be made available. This information can be found on the City of Marlborough's website at www.marlborough-ma.gov in the Benefits Section of the Human Resource Department.