

FY2023 vs. FY2024 Rate Increases**Monthly Employee Costs**

Qualified High Deductible (HDHP)		FY2023	FY2024
Harvard Pilgrim	Ind	\$ 201.63	\$ 221.84
	Fam	\$ 694.09	\$ 763.53
Blue Cross / Blue Shield	Ind	\$ 191.49	\$ 210.69
	Fam	\$ 685.44	\$ 754.12
Blue Cross / Blue Shield SELECT <i>(Limited Network)</i>	Ind	\$ -	\$ 196.35
	Fam	\$ -	\$ 703.12
Tufts	Ind	\$ 230.63	\$ 253.75
	Fam	\$ 860.47	\$ 946.63
Benchmark		FY2023	FY2024
Harvard Pilgrim	Ind	\$ 260.38	\$ 286.47
	Fam	\$ 895.28	\$ 984.87
Blue Cross / Blue Shield	Ind	\$ 227.33	\$ 250.11
	Fam	\$ 812.94	\$ 894.20
Blue Cross / Blue Shield SELECT <i>(Limited Network)</i>	Ind	\$ 211.71	\$ 232.96
	Fam	\$ 756.50	\$ 832.32
Tufts	Ind	\$ 297.94	\$ 327.66
	Fam	\$ 1,111.34	\$ 1,222.47
PPO Plans		FY2023	FY2024
Harvard Pilgrim	Ind	\$ 1,375.50	\$ 1,513.00
	Fam	\$ 3,054.50	\$ 3,360.00