Rate Changes from CY2024 to CY2025

Town of Needham

Medicare Supplement/Advantage Plans

Company	Plan	Retiree (YOU PAY)				
			ENT (2024) 12/31/2024)	` '		Change
Tufts	Preferred HMO	\$	188.50	\$	201.50	6.9%
Harvard Pilgrim	Medicare Enhanced	\$	217.00	\$	227.00	4.6%
Blue Cross Blue Shield	MEDEX	\$	212.00	\$	233.00	9.9%
	Managed Blue for Seniors	\$	129.60	\$	137.28	5.9%
Fallon Health	Medicare Plus Premier	\$	164.00	\$	179.00	9.1%
	Medicare Plus Central Premier	\$	121.50	\$	136.50	12.3%

Must be a Town of Needham Retiree, Spouse or Surviving Spouse and enrolled in both Medicare Parts A and B to be eligible