City of Boston Non-Medicare Health Insurance Plan Changes Effective 07/01/2020
Annual Enrollment May 18th – June 12th

Plan Change
- Current: All plan accumulators (copay maximums, out-of-pocket limits, therapy visits, etc.) run on a calendar year (January 1 – December 31)
- New: All plan accumulators will run on a plan year (July 1 to June 30)

Copayment Change
- Current: Rx Retail (30-day): $10/ $25/ $45 and Rx Mail Order (90-day): $20/ $50/ $100
- New: Rx Retail (30-day): $10/ $30/ $55 and Rx Mail Order (90-day): $20/ $60/ $135

New Copayments

Category	Current	New
Inpatient Hospital – care that you receive when admitted (acute, medical rehabilitation, skilled nursing care). Excludes mental health and substance use disorder.	None	Max one $50 copayment per person per plan year
Outpatient Hospital – care that you receive without being admitted or for a stay of less than 24 hours	None	Max one $50 copayment per person per plan year
Advanced Imaging (CT/PET scans, MRIs)	None	Max one $50 copayment per person per plan year

Note: each member can incur one copayment per each category per plan year

ID Cards
- New cards will be issued for participants on the HPHC HMO and BCBS PPO plans only

Flexible Spending Account (FSA)
- Current: Participants are responsible for the FSA $4 per month administrative fee
- New: Starting in the 2021 calendar year (January 1 – December 31), the full administrative fee will be paid by the City

Premium Share
- Employee share of the premium will increase by 0.5% equating to 20% for the HMO plans and 30% for the PPO plan (see chart below)

Monthly Rates		FY20 (7/1/19 - 6/30/20)		FY21 (7/1/20 - 6/30/21)	
		Employee Share %	Employee Monthly	Employee Share %	Employee Monthly
Blue Care Elect Preferred PPO	Ind	29.5%	$386.36	30.0%	$410.80
	Fam	29.5%	$953.68	30.0%	$1,014.00
Harvard Pilgrim HMO	Ind	19.5%	$166.27	20.0%	$178.23
	Fam	19.5%	$447.46	20.0%	$479.83
AllWays Health Partners HMO	Ind	19.5%	$138.58	20.0%	$148.59
	Fam	19.5%	$367.38	20.0%	$393.90

Mayor Martin J. Walsh