

Health Insurance Plan Rates for July 1, 2025

High Deductible Plans (\$2,000/\$4,000 deductible)

Plan	Coverage Level	Total Monthly	Employee Monthly	Employee Yearly
Blue Cross Blue Shield	Individual	\$923.00	\$203.06	\$2,436.72
	Family	\$2,487.00	\$547.14	\$6,565.68
Blue Cross Blue Shield Limited Network*	Individual	\$860.00	\$189.20	\$2,270.40
	Family	\$2,319.00	\$510.18	\$6,122.16
Harvard Pilgrim	Individual	\$1,134.00	\$453.60	\$5,443.20
	Family	\$2,960.00	\$1,184.00	\$14,208.00

Benchmark Plans (\$300/\$900 deductible)

Plan	Coverage Level	Total Monthly	Employee Monthly	Employee Yearly
Blue Cross Blue Shield	Individual	\$1,095.00	\$240.90	\$2,890.80
	Family	\$2,949.00	\$648.78	\$7,785.36
Blue Cross Blue Shield Limited Network*	Individual	\$1,020.00	\$224.40	\$2,692.80
	Family	\$2,744.00	\$603.68	\$7,244.16
Harvard Pilgrim	Individual	\$1,422.00	\$568.80	\$6,825.60
	Family	\$3,707.00	\$1,482.80	\$17,793.60

PPO

Plan	Coverage Level	Total Monthly	Employee Monthly	Employee Yearly
Harvard Pilgrim PPO	Individual	\$3,531.00	\$1,765.50	\$21,186.00
	Family	\$7,841.00	\$3,920.50	\$47,046.00