

Town of Dover

Retiree Health Insurance Rates

Monthly Rates Effective January 1, 2024*

(Plan options for Retirees who participate in Medicare)

Plan Type and Plan	Total Supplement Premium	Town Contribution 50%	Monthly Retiree Rate 50%
Medicare Advantage HMO Plans			
Tufts Medicare Preferred HMO	\$377.00	\$188.50	\$188.50
Fallon Medicare Plus Premier HMO	\$328.00	\$164.00	\$164.00
Fallon Medicare Plus Premier Central HMO (Must reside in Worcester County)	\$243.00	\$121.50	\$121.50
Medicare Supplement “Freedom of Choice” plans			
Medex	\$424.00	\$212.00	\$212.00
HPHC Medicare Enhanced	\$434.00	\$217.00	\$217.00
Tufts Medicare Preferred Plus	\$437.00	\$218.50	\$218.50
Medicare supplement HMO plans			
Managed Blue for Seniors	\$405.00	\$202.50	\$202.50

**Medicare Part B monthly premium is \$174.79 effective January 1, 2024*

“All WSHG Medicare Health plans automatically enroll you in prescription drug coverage. If you enroll in another Part D coverage, Medicare and Medicaid Services will dis-enroll you from your West Suburban Health Group health insurance. You will lose your health, behavioral health and prescription coverage.”