



Faculty and Nonunion Retirees hired or rehired on or after January 1, 2014

Senior Plan Monthly Rates for Retirees and Eligible Dependents Age 65 and Over

	BCBS Medex			HPHC Medicare Enhance			Tufts Medicare Preferred HMO		
Total Rate	\$597			\$599			\$624		
Years of Service	Contribution		Retiree Share	Contribution		Retiree Share	Contribution		Retiree Share
	Harvard	Retiree		Harvard	Retiree		Harvard	Retiree	
30+	\$337	\$260	44%	\$337	\$262	44%	\$337	\$287	46%
29	\$327	\$270	45%	\$327	\$272	45%	\$327	\$297	48%
28	\$317	\$280	47%	\$317	\$282	47%	\$317	\$307	49%
27	\$308	\$289	48%	\$308	\$291	49%	\$308	\$316	51%
26	\$298	\$299	50%	\$298	\$301	50%	\$298	\$326	52%
25	\$289	\$308	52%	\$289	\$310	52%	\$289	\$335	54%
24	\$279	\$318	53%	\$279	\$320	53%	\$279	\$345	55%
23	\$270	\$327	55%	\$270	\$329	55%	\$270	\$354	57%
22	\$260	\$337	56%	\$260	\$339	57%	\$260	\$364	58%
21	\$251	\$346	58%	\$251	\$348	58%	\$251	\$373	59%
20	\$241	\$356	60%	\$241	\$358	60%	\$241	\$383	61%
19	\$230	\$367	61%	\$230	\$369	62%	\$230	\$394	63%
18	\$221	\$376	63%	\$221	\$378	63%	\$221	\$403	65%
17	\$211	\$386	65%	\$211	\$388	65%	\$211	\$413	66%
16	\$202	\$395	66%	\$202	\$397	66%	\$202	\$422	68%
15	\$192	\$405	68%	\$192	\$407	68%	\$192	\$432	69%

Cost of Senior Medical Plan Coverage

The University contributes a percentage of the Harvard group BCBS Medex rate and applies that dollar amount toward the individual cost of the senior medical plan option you choose, as shown above.

The per person cost of medical coverage for you and your eligible dependent under the three senior medical plan options listed above is based on the date you retired from Harvard and your years of pensionable service. Each year Harvard recalculates the University subsidy amount. At 30 years of pensionable service, the subsidy reaches the maximum. If you select one of the other senior medical plan options, the amount of the BCBS Medex subsidy is applied toward the cost of that option. Senior plans are all individual plans; if you cover an eligible dependent on a senior plan, you pay a monthly contribution for each.

Medical Plan Rates for Retirees and Eligible Dependents Under Age 65

How to read the charts below: Select your coverage level, depending upon whether you cover just yourself (or just your spouse/domestic partner under age 65), or yourself (or just your spouse/domestic partner under age 65) and eligible dependents. Along the top of the charts are medical plan options for retirees under age 65. Down the left side, find your years of pensionable service, then follow this across to your medical plan choice to see your monthly cost for 2024.

While retirees under age 65 have access to the same plans as active employees, the premium rates are calculated separately based on the usage/experience of those enrolled (retirees and their dependents). All costs shown are for nonunion retirees hired or re-hired on or after January 1, 2014 and meeting post-retirement requirements under these rules; for details, please see hr.harvard.edu/files/humanresources/files/retireehealthplan.pdf

Individual Only Coverage

Plans & Total Monthly Cost	HMO		POS		POS PLUS		HDHP
	HUGHP*	BCBS	HUGHP*	BCBS (Also PPO)	HUGHP*	BCBS (Also PPO Plus)	BCBS
	\$1,124	\$1,157	\$1,188	\$1,223	\$1,213	\$1,246	\$1,062
Years of Service	Retiree Share						
30+	\$378	\$450	\$399	\$455	\$407	\$435	\$234
29	\$399	\$471	\$421	\$477	\$430	\$458	\$257
28	\$421	\$491	\$444	\$499	\$453	\$481	\$281
27	\$442	\$511	\$466	\$521	\$476	\$504	\$305
26	\$462	\$532	\$489	\$542	\$500	\$527	\$329
25	\$485	\$552	\$511	\$564	\$523	\$550	\$352
24	\$505	\$572	\$534	\$586	\$545	\$573	\$376
23	\$526	\$592	\$556	\$608	\$568	\$597	\$399
22	\$548	\$612	\$579	\$630	\$591	\$620	\$424
21	\$569	\$632	\$601	\$652	\$614	\$643	\$447
20	\$590	\$652	\$623	\$674	\$637	\$666	\$470
19	\$612	\$673	\$647	\$696	\$661	\$689	\$494
18	\$633	\$693	\$669	\$718	\$684	\$712	\$517
17	\$655	\$713	\$692	\$740	\$707	\$736	\$542
16	\$676	\$734	\$714	\$762	\$730	\$759	\$565
15	\$697	\$753	\$737	\$784	\$752	\$782	\$589

* HUGHP is available only to subscribers who reside in Massachusetts. In-network adult primary care physicians are primarily located in Eastern Massachusetts.

Individual Plus Spouse/Domestic Partner Coverage

Plans & Total Monthly Cost	HMO		POS		POS PLUS		HDHP
	HUGHP*	BCBS	HUGHP*	BCBS (Also PPO)	HUGHP*	BCBS (Also PPO Plus)	BCBS
	\$2,888	\$2,973	\$3,047	\$3,134	\$3,111	\$3,198	\$2,733
Years of Service	Retiree Share						
30+	\$968	\$1,156	\$1,020	\$1,157	\$1,043	\$1,115	\$606
29	\$1,024	\$1,208	\$1,079	\$1,214	\$1,102	\$1,175	\$667
28	\$1,079	\$1,260	\$1,136	\$1,271	\$1,161	\$1,234	\$727
27	\$1,133	\$1,311	\$1,195	\$1,327	\$1,220	\$1,294	\$788
26	\$1,188	\$1,364	\$1,252	\$1,383	\$1,279	\$1,353	\$849
25	\$1,243	\$1,416	\$1,310	\$1,439	\$1,338	\$1,413	\$909
24	\$1,298	\$1,468	\$1,368	\$1,497	\$1,398	\$1,472	\$971
23	\$1,352	\$1,520	\$1,426	\$1,553	\$1,456	\$1,532	\$1,032
22	\$1,407	\$1,572	\$1,484	\$1,609	\$1,516	\$1,592	\$1,092
21	\$1,462	\$1,623	\$1,542	\$1,665	\$1,574	\$1,651	\$1,153
20	\$1,516	\$1,675	\$1,599	\$1,722	\$1,634	\$1,710	\$1,214
19	\$1,572	\$1,727	\$1,658	\$1,779	\$1,693	\$1,769	\$1,274
18	\$1,627	\$1,779	\$1,715	\$1,835	\$1,752	\$1,829	\$1,335
17	\$1,682	\$1,831	\$1,774	\$1,891	\$1,811	\$1,888	\$1,396
16	\$1,736	\$1,883	\$1,831	\$1,948	\$1,870	\$1,948	\$1,456
15	\$1,791	\$1,934	\$1,889	\$2,005	\$1,929	\$2,007	\$1,518

Individual Plus Children Coverage

Plans & Total Monthly Cost	HMO		POS		POS PLUS		HDHP
	HUGHP*	BCBS	HUGHP*	BCBS (Also PPO)	HUGHP*	BCBS (Also PPO Plus)	BCBS
	\$2,795	\$2,878	\$2,950	\$3,033	\$3,011	\$3,095	\$2,644
Years of Service	Retiree Share						
30+	\$936	\$1,119	\$989	\$1,119	\$1,008	\$1,077	\$586
29	\$990	\$1,169	\$1,045	\$1,174	\$1,065	\$1,135	\$644
28	\$1,043	\$1,220	\$1,101	\$1,228	\$1,122	\$1,193	\$703
27	\$1,096	\$1,269	\$1,157	\$1,283	\$1,180	\$1,250	\$762
26	\$1,149	\$1,320	\$1,213	\$1,337	\$1,237	\$1,308	\$820
25	\$1,202	\$1,371	\$1,269	\$1,392	\$1,294	\$1,366	\$880
24	\$1,255	\$1,420	\$1,325	\$1,448	\$1,352	\$1,424	\$938
23	\$1,309	\$1,471	\$1,381	\$1,502	\$1,409	\$1,481	\$997
22	\$1,362	\$1,521	\$1,437	\$1,557	\$1,466	\$1,538	\$1,056
21	\$1,415	\$1,571	\$1,494	\$1,611	\$1,524	\$1,597	\$1,115
20	\$1,468	\$1,621	\$1,549	\$1,666	\$1,580	\$1,654	\$1,173
19	\$1,520	\$1,672	\$1,605	\$1,721	\$1,637	\$1,711	\$1,233
18	\$1,573	\$1,723	\$1,661	\$1,775	\$1,695	\$1,770	\$1,291
17	\$1,626	\$1,772	\$1,717	\$1,830	\$1,752	\$1,827	\$1,351
16	\$1,680	\$1,823	\$1,774	\$1,884	\$1,809	\$1,884	\$1,409
15	\$1,733	\$1,872	\$1,830	\$1,939	\$1,867	\$1,942	\$1,468

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Family Coverage

Plans & Total Monthly Cost	HMO		POS		POS PLUS		HDHP
	HUGHP*	BCBS	HUGHP*	BCBS (Also PPO)	HUGHP*	BCBS (Also PPO Plus)	BCBS
	\$3,105	\$3,198	\$3,279	\$3,372	\$3,349	\$3,442	\$2,939
Years of Service	Retiree Share						
30+	\$1,040	\$1,244	\$1,099	\$1,245	\$1,124	\$1,200	\$652
29	\$1,099	\$1,300	\$1,162	\$1,306	\$1,188	\$1,264	\$717
28	\$1,158	\$1,357	\$1,224	\$1,366	\$1,251	\$1,328	\$782
27	\$1,217	\$1,412	\$1,287	\$1,427	\$1,315	\$1,392	\$849
26	\$1,276	\$1,468	\$1,348	\$1,488	\$1,379	\$1,457	\$914
25	\$1,335	\$1,523	\$1,411	\$1,548	\$1,442	\$1,521	\$979
24	\$1,394	\$1,579	\$1,473	\$1,610	\$1,506	\$1,585	\$1,044
23	\$1,453	\$1,636	\$1,536	\$1,671	\$1,569	\$1,649	\$1,110
22	\$1,512	\$1,691	\$1,598	\$1,731	\$1,632	\$1,713	\$1,175
21	\$1,571	\$1,747	\$1,660	\$1,792	\$1,696	\$1,777	\$1,240
20	\$1,630	\$1,802	\$1,722	\$1,853	\$1,759	\$1,841	\$1,305
19	\$1,689	\$1,858	\$1,784	\$1,913	\$1,823	\$1,905	\$1,371
18	\$1,748	\$1,915	\$1,847	\$1,974	\$1,887	\$1,969	\$1,436
17	\$1,807	\$1,970	\$1,909	\$2,035	\$1,950	\$2,033	\$1,501
16	\$1,866	\$2,026	\$1,971	\$2,095	\$2,014	\$2,097	\$1,567
15	\$1,925	\$2,082	\$2,033	\$2,157	\$2,078	\$2,161	\$1,632

Retiree Dental Plan Monthly Rates

MetLife Dental PPO Plus

Individual	Individual + Spouse/Domestic Partner	Individual + Child(ren)	Family
\$60.79	\$108.87	\$105.37	\$117.10

Supplemental Life Insurance Monthly Rates

For all retirees enrolled in this coverage

Age	Monthly Cost Per \$1,000 of Insurance
55-59	\$0.156
60-64	\$0.199
65-69	\$0.363
70	\$0.578

PLEASE NOTE: Total amount of life insurance coverage reduces by 35% on July 1 following your 66th birthday, except retired hourly employees whose total amount of life insurance coverage reduces by 35% on July 1 following your 65th birthday. Your group coverage with Harvard ends on July 1 following your 70th birthday. You will be offered the option to port or convert your coverage at the time of reduction and termination.