# City of Newton
## Non-Medicare Retiree Health* and Dental Monthly Rates
## FY 2026 7/1/2025 - 6/30/2026

**AFSCME 3092/3092B**, AFSCME 1703 (Engineers), AFSCME 2443 (Foreman), AFSCME 2913 (PCO), IAFF 863 (Firefighters)**
**Massachusetts Nurses Association, Newton Police Association, Newton Superior Officers, and Teamsters Local 25 Retirees**

| *Retiree Contribution**** | Enrolled and Retired prior to 7/1/2023 | | | | Retired after 7/1/2023 | | Retired after 7/1/2023 | |
|---|---|---|---|---|---|---|---|---|
| | 20% | | 25% | | 20% | | 25% | |
| | Individual | Family | Individual | Family | Individual | Family | Individual | Family |
| **Network Blue NE** *HMO* | $ 224.37 | $ 631.38 | $ 280.47 | $ 789.22 | $ 224.37 | $ 631.38 | $ 280.47 | $ 789.22 |
| **Blue Care Elect** *PPO* | $ 379.25 | $ 919.04 | $ 474.07 | $ 1,148.80 | $ 998.77 | $ 2,069.70 | $ 1,054.87 | $ 2,227.55 |

**AFSCME 3092/3092B**** and Non-Union Retirees**

| *Retiree Contribution**** | Enrolled and Retired prior to 7/1/2023 | | | | Retired after 7/1/2023 | | Retired after 7/1/2023 | |
|---|---|---|---|---|---|---|---|---|
| | 20% | | 30% | | 20% | | 30% | |
| | Individual | Family | Individual | Family | Individual | Family | Individual | Family |
| **Network Blue NE** *HMO* | $ 234.93 | $ 649.51 | $ 352.39 | $ 974.26 | $ 234.93 | $ 649.51 | $ 352.39 | $ 974.26 |
| **Blue Care Elect** *PPO* | $ 387.26 | $ 938.44 | $ 580.89 | $ 1,407.66 | $ 996.61 | $ 2,094.16 | $ 1,114.07 | $ 2,418.92 |

**Newton Public Schools - NESA, Custodians, NTA Unit C, NTA Unit D, NTA Unit E, & Non-Aligned**

| *Retiree Contribution* | Retired Or Enrolled After 4/1/12, But Was Hired By NPS **Before** 7/1/11 | | Retired Or Enrolled After 4/1/12, But Was Hired By NPS **After** 7/1/11 | | Retired Or Enrolled After 4/1/12 | | New Enrollments Or Transfer Into PPO After 6/30/20 | | Hired by NPS After 1/31/24 | |
|---|---|---|---|---|---|---|---|---|---|---|
| | 20% | | 25% | | 30% | | 35% | | 48% | |
| | Individual | Family | Individual | Family | Individual | Family | Individual | Family | Individual | Family |
| **Network Blue NE** *HMO* | $223.75 | $629.61 | $279.68 | $787.02 | N/A | N/A | N/A | N/A | N/A | N/A |
| **Blue Care Elect** *PPO* | N/A | N/A | N/A | N/A | $568.88 | $1,378.56 | $663.69 | $1,608.32 | $910.21 | $2,205.70 |

| *Retiree Contribution* | **Legacy Plan** City and NPS Retirees | |
|---|---|---|
| | Enrolled prior to 4/1/2012 | |
| | 20% | |
| | Individual | Family |
| **Network Blue NE -** HMO | $ 264.91 | $ 737.03 |
| **Blue Care Elect -** PPO | $ 415.28 | $ 1,017.03 |

| **Dental Freedom Blue** | | |
|---|---|---|
| July 1, 2025 - June 30, 2026 | | |
| Individual | 2 Person | Family |
| $ 56.29 | $ 138.86 | $ 214.94 |

* All retirees spouses/ex-spouses over the age of 65 must enroll in Medicare Part A and B. Proof of ineligibility is required to remain enrolled in a Non-Medicare plan.

** AFSCME 3092/3092B hired after 7/1/2011 (25% contribution ONLY)

*** Retiree contribution is based on the contribution paid prior to retirement.

**** AFSCME 3092/3092B hired before 7/1/2011 (20% contribution ONLY)