

## Town of Shrewsbury 2020 - 2021 Retiree Payroll Agreement

I \_\_\_\_\_ authorize the Town of Shrewsbury to deduct the premiums designated below from my: ( ) MTR Check ( ) Retirement Check ( ) Direct Payment

Pay Frequency	Monthly Retirees				Monthly Surviving Spouses		
Benchmark Plans	EMP	TOWN			EMP	TOWN	
<b>BC/BS</b>							
Individual	___ \$427.20	\$640.80	8262		___ \$534.00	\$534.00	8267
Family	___ \$1,145.20	\$1,717.80	8252		___ \$1,431.50	\$1,431.50	8257
<b>Tufts</b>							
Individual	___ \$433.60	\$650.40	8282		___ \$542.00	\$542.00	8287
Family	___ \$1,135.20	\$1,702.80	8272		___ \$1,419.00	\$1,419.00	8277
<b>HPHC</b>							
Individual	___ \$412.00	\$618.00	8232		___ \$515.00	\$515.00	8242
Family	___ \$1,073.20	\$1,609.80	8212		___ \$1,341.50	\$1,341.50	8222
<b>Fallon Select</b>							
Individual	___ \$213.30	\$576.70	8332		___ \$395.00	\$395.00	8342
Family	___ \$574.83	\$1,554.17	8312		___ \$1,064.50	\$1,064.50	8322
<b>Fallon Direct</b>							
Individual	___ \$161.92	\$574.08	8432		___ \$368.00	\$368.00	8442
Family	___ \$435.60	\$1,544.40	8412		___ \$990.00	\$990.00	8422
<b>HDHP (HSA) Plans</b>	EMP	TOWN			EMP	TOWN	
<b>BC/BS</b>							
Individual	___ \$344.80	\$517.20	8091		___ \$431.00	\$431.00	8101
Family	___ \$926.00	\$1,389.00	8092		___ \$1,157.50	\$1,157.50	8102
<b>Tufts</b>							
Individual	___ \$335.60	\$503.40	8093		___ \$419.50	\$419.50	8103
Family	___ \$879.20	\$1,318.80	8094		___ \$1,099.00	\$1,099.00	8104
<b>HPHC</b>							
Individual	___ \$318.80	\$478.20	8095		___ \$398.50	\$398.50	8105
Family	___ \$832.00	\$1,248.00	8096		___ \$1,040.00	\$1,040.00	8106
<b>Fallon Select</b>							
Individual	___ \$179.55	\$485.45	8097		___ \$332.50	\$332.50	8107
Family	___ \$484.65	\$1,310.35	8098		___ \$897.50	\$897.50	8108
<b>Fallon Direct</b>							
Individual	___ \$136.40	\$483.60	8099		___ \$310.00	\$310.00	8109
Family	___ \$367.62	\$1,303.38	8100		___ \$835.50	\$835.50	8110
<b>Indemnity Plans</b>	EMP	TOWN			EMP	TOWN	
<b>HPHC PPO</b>							
Individual	___ \$1,329.00	\$1,329.00	8162		___ \$1,329.00	\$1,329.00	8167
Family	___ \$2,951.00	\$2,951.00	8152		___ \$2,951.00	\$2,951.00	8157
<b>Life Insurance</b>	EMP	TOWN					
Basic Life	___ \$4.24	\$4.24	8900				

I understand that if my premiums are not deducted correctly from my payroll/retirement check it is my responsibility to notify the Town Benefits Administrator, and I will be responsible for all back premiums. I also understand that the Town deducts premium one month in advance of coverage and additional premium due upon initial enrollment will also be deducted from my first payroll/retirement check.

**EFFECTIVE DATE:** \_\_\_\_\_

**SIGNED:** \_\_\_\_\_

**DATED:** \_\_\_\_\_