

TOWN OF LYNNFIELD						
FY21 EYE MED INSURANCE RATES						
EFFECTIVE 7/1/20						
	Total Cost	Total Cost	Employee	Employee	Employee	Employee
	Per Year	Per Month	Pay Monthly	Weekly - 48	Biweekly - 24	Biweekly 18
Individual	\$83.64	\$6.97	\$6.97	\$1.74	\$3.49	\$4.65
Employee & Spouse	\$159.00	\$13.25	\$13.25	\$3.31	\$6.63	\$8.83
Employee & Children	\$167.40	\$13.95	\$13.95	\$3.49	\$6.98	\$9.30
Family	\$246.00	\$20.50	\$20.50	\$5.13	\$10.25	\$13.67
TOWN OF LYNNFIELD						
FY 21 ALTUS DENTAL INSURANCE RATES						
EFFECTIVE 7/1/20						
	Total Cost	Total Cost	Employee	Employee	Employee	Employee
	Per Year	Per Month	Pay Monthly	Weekly - 48	Biweekly - 24	Biweekly - 18
INDIVIDUAL HIGH PLAN	\$608.40	\$50.70	\$40.70	\$10.18	\$20.35	\$27.14
FAMILY HIGH PLAN	\$1,521.48	\$126.79	\$116.79	\$29.20	\$58.40	\$77.86
TOWN OF LYNNFIELD						
FY21 BOSTON MUTUAL INSURANCE RATES						
EFFECTIVE 7/1/20						
	Total Cost	Total Cost	Employee	Employee	Employee	Employee
	Per Year	Per Month	Pay Monthly	Weekly - 48	Biweekly -24	Biweekly -18
LIFE (\$10,000 Policy)	\$82.80	\$6.90	\$3.45	\$0.86	\$1.73	\$2.30
Monthly Premium Rates per \$1,000 Coverage						
Under age 35	\$0.13					
35-39	\$0.17					
40-44	\$0.26					
45-49	\$0.36					
50-54	\$0.60					
55-59	\$1.00					
60-64	\$1.55					
65-69	\$2.42					
70-74	\$3.85					
75+ (actives only)	\$6.79					