

# Town of Barre

## Administrative Contract

United Steelworkers AFL-CIO-CLC USW Local #4 Unit 103

### HealthCare Cost Share

The Town of Barre will pay 86% of the premium associated with the Standard Platinum health plan and the Select Gold CDHP plan based on full-time equivalent. All full-time equivalent employees working on average 30 or more hours per week are eligible for group health coverage.

Health Plans	Employer Cost (Based on Full-Time)	Employer Cost (Based on Full-Time)	Monthly Employee Costs	Monthly Employee Costs
Through December 31, 2024	Platinum Standard	Select Gold CDHP	Platinum Standard	Select Gold CDHP
Single	\$974.02	\$783.39	\$158.56	\$127.53
Two Person	\$1948.05	\$1566.78	\$317.13	\$255.06
Parent/Child(ren)	\$1879.87	\$1511.95	\$306.03	\$246.13
Family	\$2737.02	\$2201.33	\$445.56	\$358.36

In addition, the Town of Barre will contribute to a Health Reimbursement Arrangement (HRA) with the Platinum standard Plan and a Health Savings Account (HSA) with the Select Gold CDHP Plan to assist you with your out-of-pocket medical expenses. The Town will reimburse employees for out-of-pocket expenses, for deductibles, co-payments, office visits and co-insurance, after they have paid a first dollar responsibility. The deductible for prescriptions will not be reimbursed.

HRA-Platinum Standard Plan	Single	Two-Person	Parent/Child(ren)	Family
Employee will pay <b>First</b> Dollar Responsibility	\$200.00	\$400.00	\$400.00	\$400.00
Employer will reimburse <b>Last</b>	\$1300.00	\$2600.00	\$2600.00	\$2600.00

HSA-Select Gold CDHP Plan	Single	Two-Person	Parent/Child(ren)	Family
HSA Amount (full year)	\$1600.00	\$3200.00	\$3200.00	\$3200.00

If the participating employee exhausts the Town of Barre’s contribution to the HSA for that specific calendar year, the remaining deductible to reach the out-of-pocket maximum shall be shared at 80% - Town and 20%-Employee through a post deductible HRA.

Employees wishing to change or newly enroll in health insurance on the Town of Barre’s health insurance MUST complete a new enrollment/change form. The following documents that are listed below, you may find helpful in determining which health plan best fits your needs.

These additional resources are listed on [Welcome to Town of Barre, Vermont \(barretown.org\)](http://www.barretown.org)

[Summary of Benefits & Coverage – Standard Platinum Plan](#)

[Summary of Benefits & Coverage – Select Gold CDHP Plan](#)

**If you should have any questions about this insurance plan, please visit the Blue Cross Blue Shield Online Member Service Center at [Blue Cross Member Services | BlueCross BlueShield of Vermont \(bluecrossvt.org\)](http://www.bluecrossvt.org)**

**or**

**Call BCBS Customer Service at (800) 247-2583.**