

04/16/2019 09:47
3086dmcandrews

TOWN OF WEYMOUTH
NEXT YEAR / CURRENT YEAR BUDGET ANALYSIS

P 1
bgnyrpts

PROJECTION: 20201 FY20 GENERAL FUND

FOR PERIOD 99

ACCOUNTS FOR:

GENERAL FUND		2018 ACTUAL	2019 ORIG BUD	2019 REVISED BUD	2019 ACTUAL	2019 PROJECTION	2020 MAYOR	PCT CHANGE
<hr/>								
0940	Workers Comp & Health Insr							
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194	PENSIONS BENEFITS & INSURANCE							
11945840	517202 HEALTH INS	21,237,101.37	21,542,425.00	21,542,425.00	16,666,955.76	21,542,425.00	21,973,274.00	2.0%
11945840	596500 TR/WCOM/TR	1,100,000.00	775,000.00	775,000.00	775,000.00	775,000.00	800,000.00	3.2%
	TOTAL PENSIONS BENEFITS & IN	22,337,101.37	22,317,425.00	22,317,425.00	17,441,955.76	22,317,425.00	22,773,274.00	2.0%
	TOTAL Workers Comp & Health	22,337,101.37	22,317,425.00	22,317,425.00	17,441,955.76	22,317,425.00	22,773,274.00	2.0%
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0941	Medicare & Social Security Tax							
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194	PENSIONS BENEFITS & INSURANCE							
11945941	517205 SS TAX	6,801.87	20,000.00	20,000.00	4,229.05	20,000.00	10,000.00	-50.0%
11945941	517212 INSURANCE	1,288,046.25	1,150,000.00	1,150,000.00	1,031,199.02	1,150,000.00	1,200,000.00	4.3%
	TOTAL PENSIONS BENEFITS & IN	1,294,848.12	1,170,000.00	1,170,000.00	1,035,428.07	1,170,000.00	1,210,000.00	3.4%
	TOTAL Medicare & Social Secu	1,294,848.12	1,170,000.00	1,170,000.00	1,035,428.07	1,170,000.00	1,210,000.00	3.4%
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0942	Unemployment & Life Insurance							
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194	PENSIONS BENEFITS & INSURANCE							
11945742	517206 UNEMPLOYME	254,144.67	300,000.00	300,000.00	180,488.18	309,520.00	280,000.00	-6.7%
11945942	517203 LIFE INS	51,703.18	70,000.00	70,000.00	42,426.28	70,000.00	70,000.00	.0%
	TOTAL PENSIONS BENEFITS & IN	305,847.85	370,000.00	370,000.00	222,914.46	379,520.00	350,000.00	-5.4%
	TOTAL Unemployment & Life In	305,847.85	370,000.00	370,000.00	222,914.46	379,520.00	350,000.00	-5.4%
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0955	Contributory Retirement							
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194	PENSIONS BENEFITS & INSURANCE							
11945555	517101 CONT/RETIR	10,541,189.00	10,965,607.00	10,965,607.00	10,965,607.00	10,965,607.00	11,389,412.00	3.9%
	TOTAL PENSIONS BENEFITS & IN	10,541,189.00	10,965,607.00	10,965,607.00	10,965,607.00	10,965,607.00	11,389,412.00	3.9%
	TOTAL Contributory Retirement	10,541,189.00	10,965,607.00	10,965,607.00	10,965,607.00	10,965,607.00	11,389,412.00	3.9%
	TOTAL GENERAL FUND	34,478,986.34	34,823,032.00	34,823,032.00	29,665,905.29	34,832,552.00	35,722,686.00	2.6%
	TOTAL REVENUE	.00	.00	.00	.00	.00	.00	.0%
	TOTAL EXPENSE	34,478,986.34	34,823,032.00	34,823,032.00	29,665,905.29	34,832,552.00	35,722,686.00	2.6%
	GRAND TOTAL	34,478,986.34	34,823,032.00	34,823,032.00	29,665,905.29	34,832,552.00	35,722,686.00	2.6%

** END OF REPORT - Generated by Debra McAndrews **

Eff. 7/1/2019 through 6/30/2020

Town of Weymouth GIC Rate Sheet

Rates eff. 7/1/2019

	Individual Coverage						Family Coverage				
	Monthly Premium %	Total Plan Premium Cost	Monthly Premium Cost	Number of Participants in Plan	Town's per Subscriber Cost	Town's Total Monthly Plan Cost	Total Plan Premium Cost	Monthly premium Cost	Number of Participants in Plan	Town's per Subscriber Cost	Town's Total Monthly Plan Cost
Health Plan											
Fallon Community Health Plan Direct Care	17.75%	\$ 600.68	\$ 106.63	9	\$ 494.06	\$ 4,446.54	\$ 1,514.23	\$ 268.78	8	\$ 1,245.46	\$ 9,963.68
Fallon Community Health Plan Select Care	17.75%	\$ 811.79	\$ 144.10	2	\$ 667.70	\$ 1,335.40	\$ 1,971.89	\$ 350.02	11	\$ 1,621.88	\$ 17,840.68
Harvard Pilgrim Independence Plan	17.75%	\$ 889.65	\$ 157.92	145	\$ 731.74	\$ 106,102.30	\$ 2,171.49	\$ 385.44	233	\$ 1,786.06	\$ 416,151.98
Harvard Pilgrim Primary Choice	17.75%	\$ 645.80	\$ 114.63	6	\$ 531.18	\$ 3,187.08	\$ 1,648.48	\$ 292.26	7	\$ 1,354.23	\$ 9,479.61
Health New England	17.75%	\$ 570.81	\$ 101.32	1	\$ 469.50	\$ 469.50	\$ 1,356.54	\$ 240.79	0	\$ 1,115.76	\$ -
Tufts Health Plan Navigator	17.75%	\$ 747.76	\$ 132.73	32	\$ 615.04	\$ 19,681.28	\$ 1,822.08	\$ 323.42	47	\$ 1,498.67	\$ 70,437.49
Tufts Health Plan Spirit	17.75%	\$ 565.91	\$ 100.45	7	\$ 485.47	\$ 3,258.29	\$ 1,358.94	\$ 241.22	3	\$ 1,117.73	\$ 3,353.19
Allways Health Partners (Formally NHP)	17.75%	\$ 646.93	\$ 114.84	17	\$ 532.10	\$ 9,045.70	\$ 1,677.69	\$ 297.78	25	\$ 1,379.91	\$ 34,497.75
UniCare State Indemnity Plan/Basic with C/C (Comprehensive)	20.00%	\$ 1,086.10	\$ 217.22	100	\$ 868.88	\$ 86,888.00	\$ 2,406.59	\$ 481.32	60	\$ 1,925.28	\$ 115,516.80
UniCare State Indemnity Plan/Basic without C/C (Non-Comprehensive)	20.00%	\$ 1,034.54	\$ 206.91	0	\$ 827.64	\$ -	\$ 2,289.19	\$ 457.84	0	\$ 1,831.36	\$ -
UniCare State Indemnity Plan/ Community Choice	17.75%	\$ 517.51	\$ 91.86	65	\$ 425.66	\$ 27,667.90	\$ 1,276.96	\$ 226.67	96	\$ 1,060.30	\$ 100,828.80
UniCare State Indemnity Plan/PLUS	17.75%	\$ 696.10	\$ 123.56	96	\$ 572.55	\$ 54,964.80	\$ 1,654.60	\$ 293.70	266	\$ 1,360.91	\$ 362,002.06
				480		\$ 317,046.79			756		\$ 1,140,072.04

Teachers Who Retired Before November 24, 2008, Retirees and Survivors

	Monthly Premium %	Total Plan Premium Cost	Monthly premium Cost	Number of Participants in Plan	Town's per Subscriber Cost	Town's Total Monthly Plan Cost
	Per Person					
Health Plan						
Fallon Senior Plan* (NO LONGER AVAILABLE)	12.50%	\$ -	\$ -	0	\$ -	\$ -
Harvard Pilgrim Medicare Enhance	12.50%	\$ 391.12	\$ 48.89	532	\$ 342.23	\$ 182,066.36
Health New England MedPlus	12.50%	\$ 391.81	\$ 48.98	2	\$ 342.84	\$ 685.68
Tufts Health Plan Medicare Complement	12.50%	\$ 371.50	\$ 46.44	5	\$ 325.07	\$ 1,625.35
Tufts Health Plan Medicare Preferred*	12.50%	\$ 322.43	\$ 40.31	6	\$ 282.13	\$ 1,692.78
UniCare State Indemnity Plan/Medicare Extension (OME) with C/C (Comprehensive)	12.50%	\$ 386.93	\$ 48.37	585	\$ 338.57	\$ 201,449.15
UniCare State Indemnity Plan/Medicare Extension (OME) without C/C (Non-Comprehensive)	12.50%	\$ 376.31	\$ 47.04	0	\$ 329.28	\$ -
				1140		\$ 387,519.32

FY20:
Eff: 7/1/2019

Monthly	\$ 1,844,638.15
Annual	\$ 22,135,657.80

Plans	
Active	986
Retirees	1270
Survivors	120
Total	2376

FY19:
Eff: 7/1/2018

Monthly	\$ 1,794,967.37
Annual	\$ 21,539,608.44

Plans	
Active	989
Retirees	1269
Survivors	109
Total	2367

GIC Health Plan Rates
MONTHLY RATES AS OF JULY 1, 2019
FOR THE TOWN OF WEYMOUTH ENROLLEES
INCLUDING THE 0.35% ADMINISTRATIVE FEE

Retirees and Survivors without Medicare

Health Plan	Teacher Who Retired Before November 24, 2008 Monthly %	Teacher Who Retired Before November 24, 2008 Monthly \$	Teacher Who Retired Before November 24, 2008 Monthly \$	Employee and Non-Medicare Retiree/ Survivor Pays Monthly %	Employee and Non-Medicare Retiree/ Survivor Pays Monthly \$	Employee and Non-Medicare Retiree/ Survivor Pays Monthly \$
Fallon Health Direct Care	17.75%	\$ 106.63	\$ 268.78	17.75%	\$ 106.63	\$ 268.78
Fallon Health Select Care	17.75%	\$ 144.10	\$ 350.02	17.75%	\$ 144.10	\$ 350.02
Harvard Pilgrim Independence Plan	17.75%	\$ 157.92	\$ 385.44	17.75%	\$ 157.92	\$ 385.44
Harvard Pilgrim Primary Choice Plan	17.75%	\$ 114.63	\$ 292.26	17.75%	\$ 114.63	\$ 292.26
Health New England	17.75%	\$ 101.32	\$ 240.79	17.75%	\$ 101.32	\$ 240.79
NHP Prime (Neighborhood Health Plan)	17.75%	\$ 132.73	\$ 323.42	17.75%	\$ 132.73	\$ 323.42
Tufts Health Plan Navigator	17.75%	\$ 100.45	\$ 241.22	17.75%	\$ 100.45	\$ 241.22
Tufts Health Plan Spirit	17.75%	\$ 114.84	\$ 297.79	17.75%	\$ 114.84	\$ 297.79
UniCare State Indemnity Plan/Basic with CIC (Comprehensive)	20%	\$ 217.22	\$ 481.32	20%	\$ 217.22	\$ 481.32
UniCare State Indemnity Plan/Basic without CIC (Non-Comprehensive)	20%	\$ 206.91	\$ 457.84	20%	\$ 206.91	\$ 457.84
UniCare State Indemnity/Community Choice	17.75%	\$ 91.86	\$ 226.67	17.75%	\$ 91.86	\$ 226.67
UniCare State Indemnity Plan/PLUS	17.75%	\$ 123.56	\$ 293.70	17.75%	\$ 123.56	\$ 293.70

Retirees and Survivors with Medicare

Health Plan	Teacher Who Retired Before November 24, 2008 Pays Monthly Per Person %	Teacher Who Retired Before November 24, 2008 Pays Monthly Per Person \$	Retiree and Survivor Pays Monthly Per Person %	Retiree and Survivor Pays Monthly Per Person \$
Harvard Pilgrim Medicare Enhance	12.5%	48.89	12.5%	48.89
Health New England MedPlus	12.5%	48.98	12.5%	48.98
Tufts Health Plan Medicare Complement	12.5%	46.44	12.5%	46.44
Tufts Health Plan Medicare Preferred**	12.5%	40.31	12.5%	40.31
UniCare State Indemnity Plan/Medicare Extension (OME) with CIC (Comprehensive)	12.5%	48.37	12.5%	48.37
UniCare State Indemnity Plan/Medicare Extension (OME) without CIC (Non-Comprehensive)	12.5%	47.04	12.5%	47.04

Retirees and Survivors Dental Coverage

Dental Plan	Individual	Family
Basic Low Plan	\$42.33	\$88.89
Enhanced High Plan	\$47.86	\$100.51

Retirees and Survivors Vision Coverage

Vision Plan	Individual	2-person	Family
Basic Low Plan	\$3.55	\$6.74	\$9.90
Enhanced High Plan	\$7.16	\$13.59	\$19.96

Rates are calculated by the Town of Weymouth Benefits Office.

QUESTIONS? Call Human Resources 781-340-5010

*Town of Weymouth,
Massachusetts*



WEYMOUTH RETIREMENT
BOARD
807 BROAD STREET
WEYMOUTH, MA 02189

TEL (781)-331-8721
FAX (781)-331-3005

M E M O R A N D U M

TO: Brian Connolly, CFO
Patrice Cook, Town Accountant
Robert Conlon, Treasurer
Jennifer Curtis-Whipple, Superintendent of Schools
Leia DiLorenzo-Secor, Financial Supervisor
Michael Flaherty, Director, Weymouth Housing Authority
Laura Ficociello, Bookkeeper
Sean Cleaves, Director, Weymouth-Braintree Reg. Recreation Conservation Dist.

FR: Jennifer Miller, Assistant Director

RE: Fiscal Year 2020 Appropriation

DATE: December 7, 2018

Attached please find appropriation amounts for Fiscal 2020. The amounts requested from each of the four units total the appropriation for FY 2020 in the amount of \$11,698,813.00.

The appropriation is apportioned utilizing the September 30, 2018 employee head counts and the payroll figures that were gathered from your individual units.

Appropriations are payable on July 1, 2019 and the breakdown is as follows:

Town of Weymouth	69.19 % of total	\$8,167,700.00
Weymouth Schools	28.24 % of total	\$3,221,712.00
Weymouth Housing Auth	2.29 % of total	\$ 277,458.00
Wey-Bra. Rec.	.28 % of total	\$ 31,943.00

Please contact this office if you have any question. Thank you.