

**TOWN OF MANCHESTER, CT
HEALTH INSURANCE RATES**

The 2019-2020 health insurance bi-weekly cost share amounts listed below will be effective July 1, 2019 through June 30, 2020.

Fire Union Employees

	SINGLE	DOUBLE	FAMILY
OAP Preferred	\$113.63	\$209.72	\$318.03
OAP Plan	\$84.33	\$152.94	\$235.84
OAP Plus	\$66.58	\$120.75	\$186.19
OAP Basic	\$53.69	\$99.33	\$147.65

**TOWN OF MANCHESTER, CT
HEALTH INSURANCE RATES**

The 2019-2020 health insurance bi-weekly cost share amounts listed below will be effective July 1, 2019 through June 30, 2020.

Fire Union Employees

	SINGLE	DOUBLE	FAMILY
Cigna Choice Fund	\$43.32	\$77.93	\$121.78

Prescription co-pays: \$5/\$20/\$35 to unlimited maximum, Three Tier Formulary RX Rider