

**TOWN OF MANCHESTER, CT  
HEALTH INSURANCE RATES  
RESIDUAL UNION EMPLOYEES**

The 2016-2017 health insurance bi-weekly cost share amounts listed below will be effective July 1, 2016 through June 30, 2017.

**Hired Prior to 07/01/04:**

	<b>SINGLE</b>	<b>DOUBLE</b>	<b>FAMILY</b>
OAP Preferred	\$46.19	\$85.26	\$129.23
OAP Plan	\$40.85	\$74.13	\$114.18
OAP Plus	\$40.85	\$74.13	\$114.18
OAP Basic	\$32.73	\$60.56	\$90.02

**Hired On or After 07/01/04:**

	<b>SINGLE</b>	<b>DOUBLE</b>	<b>FAMILY</b>
OAP Plan	\$70.56	\$128.04	\$197.22
Dental	\$3.28	\$8.53	\$10.50
OAP Plus	\$59.42	\$107.83	\$166.08
Dental	\$2.76	\$7.18	\$8.84
OAP Basic	\$38.68	\$71.57	\$106.38
Dental	\$2.25	\$5.84	\$7.18

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Cigna Choice Fund	\$30.67	\$55.20	\$86.17

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	<b>SINGLE</b>	<b>DOUBLE</b>	<b>FAMILY</b>
Cigna Choice Fund	\$30.67	\$55.20	\$86.17
Dental	\$2.76	\$7.18	\$8.84

Prescription co-pays: \$5/\$20/\$30 shall apply to prescriptions after the exhaustion of the HDHP deductibles.