

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

The 2020-2021 health insurance bi-weekly cost share amounts listed below will be effective July 1, 2020 through June 30, 2021.

Hired Prior to 07/01/04:

	SINGLE	DOUBLE	FAMILY
OAP Preferred	\$61.21	\$112.97	\$171.31
OAP Plan	\$54.86	\$99.49	\$153.42
OAP Plus	\$54.86	\$99.49	\$153.42
OAP Basic	\$45.96	\$85.03	\$126.39
Cigna Choice Fund (HDHP)	\$42.38	\$76.25	\$119.16

Hired On or After 07/01/04:

	SINGLE	DOUBLE	FAMILY
OAP Plan	\$86.86	\$157.53	\$242.92
Dental	\$3.83	\$9.96	\$12.26
OAP Plus	\$73.14	\$132.66	\$204.56
Dental	\$3.23	\$8.39	\$10.32
OAP Basic	\$49.79	\$92.11	\$136.92
Dental	\$2.62	\$6.82	\$8.39
Cigna Choice Fund (HDHP)	\$42.38	\$76.25	\$119.16
Dental	\$2.42	\$6.29	\$7.74

Prescription co-pays: \$5/\$20/\$35 shall apply to prescriptions after the exhaustion of the HDHP deductibles.