

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

The 2017-2018 health insurance bi-weekly cost share amounts listed below will be effective July 1, 2017 through June 30, 2018.

Hired Prior to 07/01/04:

	SINGLE	DOUBLE	FAMILY
OAP Plus	\$48.34	\$87.67	\$135.19
OAP Basic	\$38.99	\$72.12	\$107.21

Hired On or After 07/01/04:

	SINGLE	DOUBLE	FAMILY
OAP Plus	\$64.46	\$116.90	\$180.26
Dental	\$2.62	\$6.82	\$8.39
OAP Basic	\$42.23	\$78.13	\$116.15
Dental	\$2.13	\$5.54	\$6.82

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Hired Prior to 07/01/04:

	SINGLE	DOUBLE	FAMILY
Cigna Choice Fund	\$36.29	\$65.29	\$102.03

Hired On or After 07/01/04:

	SINGLE	DOUBLE	FAMILY
Cigna Choice Fund	\$36.29	\$65.29	\$102.03
Dental	\$1.97	\$5.11	\$6.29

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