TOWN OF MANCHESTER, CT HEALTH INSURANCE RATES LIBRARY UNION EMPLOYEES

The 2023-2024 health insurance bi-weekly cost share amounts listed below will be effective July 1, 2023 through June 30, 2024.

Hired Prior to 07/01/04:

	SINGLE	DOUBLE	FAMILY
OAP Basic	\$89.43	\$164.80	\$246.77
Cigna Choice Fund (HDHP)	\$65.64	\$118.28	\$184.35

Hired On or After 07/01/04:

	SINGLE	DOUBLE	FAMILY
OAP Basic	\$89.43	\$164.80	\$246.77
Dental	\$2.02	\$5.24	\$6.45
Cigna Choice Fund	\$65.64	\$118.28	\$184.35
(HDHP) Dental	\$2.02	\$5.24	\$6.45

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