

<b>City Of Columbia</b> <b>NON MEDICARE MEDICAL RATES</b> <b>Group Insurance PPO PLAN \$750 DEDUCTIBLE</b> <b>(EFFECTIVE 1/1/2022)</b>	
Closed to new enrollments 1/1/2017	
Medical Coverage	
Single	\$891.13
Single + Spouse	\$1,871.37
Single + Children	\$1,648.60
Full Family	\$2,628.84
\$750 Individual deductible \$2250 Family deductible	

<b>City Of Columbia</b> <b>NON MEDICARE MEDICAL RATES</b> <b>Group Insurance PPO PLAN \$1500 DEDUCTIBLE</b> <b>(EFFECTIVE 1/1/2022)</b>	
Medical Coverage	Retiree Premium
Single	\$856.88
Single + Spouse	\$1,799.45
Single + Children	\$1,585.23
Full Family	\$2,527.80
\$1500 Individual deductible \$4500 Family deductible	

<b>City Of Columbia</b> <b>NON MEDICARE MEDICAL RATES</b> <b>High Deductible Health Plan \$2800 DEDUCTIBLE</b> <b>(EFFECTIVE 1/1/2022)</b>	
Medical Coverage	Retiree Premium
Single	\$840.11
Single + Spouse	\$1,764.24
Single + Children	\$1,554.21
Full Family	\$2,478.34
\$2800 Individual deductible \$5600 Family deductible	

<b>City Of Columbia</b> <b>RETIREE - DELTA DENTAL</b> <b>(Effective 1/1/2022)</b>	
Dental Coverage	Retiree Premium
Single	\$33.60
Single + Spouse	\$67.01
Single + Children	\$67.01
Full Family	\$100.37