

City Of Columbia NON MEDICARE MEDICAL RATES Group Insurance PPO: \$750 Deductible Plan Effective: 1/1/2026	
Closed to new enrollments 1/1/2017	
Coverage Level	Monthly Premium
Single	\$1,257.27
Single + Spouse	\$2,640.26
Single + Child(ren)	\$2,325.95
Full Family	\$3,708.95
Individual Deductible: \$750	Family Deductible: \$2,250

City Of Columbia NON MEDICARE MEDICAL RATES Group Insurance PPO: \$1,500 Deductible Plan Effective: 1/1/2026	
Coverage Level	Monthly Premium
Single	\$1,208.95
Single + Spouse	\$2,538.79
Single + Child(ren)	\$2,236.55
Full Family	\$3,566.40
Individual Deductible: \$1,500	Family Deductible: \$4,500

City Of Columbia NON MEDICARE MEDICAL RATES Group Insurance: \$3,400 Deductible with H.S.A. Plan Effective: 1/1/2026	
Coverage Level	Monthly Premium
Single	\$1,185.28
Single + Spouse	\$2,489.11
Single + Child(ren)	\$2,192.79
Full Family	\$3,496.62
Individual Deductible: \$3,400	Family Deductible: \$6,800

City Of Columbia Retiree Rates Delta Dental Coverage Effective: 1/1/2026	
Coverage Level	Monthly Premium
Employee Only	\$33.60
Employee + Spouse	\$67.01
Employee + Child(ren)	\$67.01
Full Family	\$100.37