

City Of Columbia	
NON MEDICARE MEDICAL RATES	
Group Insurance PPO: \$750 Deductible Plan	
Effective: 1/1/2025	
Closed to new enrollments 1/1/2017	
Coverage Level	Monthly Premium
Single	\$1,073.12
Single + Spouse	\$2,253.55
Single + Child(ren)	\$1,985.28
Full Family	\$3,165.71
Individual Deductible: \$750	Family Deductible: \$2,250

City Of Columbia	
NON MEDICARE MEDICAL RATES	
Group Insurance PPO: \$1,500 Deductible Plan	
Effective: 1/1/2025	
Coverage Level	Monthly Premium
Single	\$1,031.88
Single + Spouse	\$2,166.94
Single + Child(ren)	\$1,908.97
Full Family	\$3,044.04
Individual Deductible: \$1,500	Family Deductible: \$4,500

City Of Columbia	
NON MEDICARE MEDICAL RATES	
Group Insurance PPO: \$3,300 Deductible with H.S.A. Plan	
Effective: 1/1/2025	
Coverage Level	Monthly Premium
Single	\$1,011.68
Single + Spouse	\$2,124.54
Single + Child(ren)	\$1,871.62
Full Family	\$2,984.48
Individual Deductible: \$3,300	Family Deductible: \$6,600

City Of Columbia	
Retiree Rates	
Delta Dental Coverage	
Effective: 1/1/2025	
Coverage Level	Monthly Premium
Employee Only	\$33.60
Employee + Spouse	\$67.01
Employee + Child(ren)	\$67.01
Full Family	\$100.37