#### **City Of Columbia**

### NON MEDICARE MEDICAL RATES Group Insurance PPO PLAN \$750 DEDUCTIBLE (EFFECTIVE 1/1/2024)

Closed to new enrollments 1/1/2017  Medical Coverage		
Single	\$1,023.77	
Single + Spouse	\$2,149.92	
Single + Children	\$1,893.99	
Full Family	\$3,020.14	
\$750 Individual deductible	\$2250 Family deductible	

# City Of Columbia NON MEDICARE MEDICAL RATES Group Insurance PPO PLAN \$1500 DEDUCTIBLE (EFFECTIVE 1/1/2024)

Medical Coverage	Retiree Premium
Single	\$984.43
Single + Spouse	\$2,067.30
Single + Children	\$1,821.19
Full Family	\$2,904.06
\$1500 Individual deductible \$4500 Family deductible	

#### **City Of Columbia**

### NON MEDICARE MEDICAL RATES High Deductible Health Plan \$3200 DEDUCTIBLE (EFFECTIVE 1/1/2024)

Medical Coverage	Retiree Premium
Single	\$965.16
Single + Spouse	\$2,026.85
Single + Children	\$1,785.55
Full Family	\$2,847.24
\$3200 Individual deductible \$6400 Family deductible	

## City Of Columbia RETIREE - DELTA DENTAL (Effective 1/1/2024)

Dental Coverage	Retiree Premium
Single	\$33.60
Single + Spouse	\$67.01
Single + Children	\$67.01
Full Family	\$100.37