



MONTHLY RATES EFFECTIVE: JULY 1, 2024- JUNE 30, 2025

KAISER PERMANENTE

Cigna

	Kaiser H.S.A HDHP/H S A	Kaiser HMO + Nonstop	Kaiser DHMO Plus + Nonstop	Cigna H S A	Cigna Nonstop	Cigna Open Access Plus (OAP) Nonstop
SINGLE	611.04	683.36	826.25	766.72	996.16	1,509.01
E+SPOUSE	1,361.18	1,396.05	1,740.29	1,722.43	2,175.15	3,300.60
E+ CHILD(REN)	1,101.52	1,204.87	1,452.95	1,391.61	1,814.57	2,729.85
FAMILY	1,788.19	1,938.73	2,343.40	2,266.51	2,931.97	4,455.59

	SUPERIOR VISION PLAN		MET LIFE INSURANCE	
	SINGLE	4.98	Basic Life \$10,000 2.30	
	EMPLOYEE + 1	9.97	Basic Life \$25,000 5.65	
	FAMILY	16.89	Basic Life \$50,000 11.30	
	Employee Assistance	1.00	Voluntary Life Rates Per \$1,000	
			0 to 39 0.10	
			<i>40-49</i> 0.30	
5/20/2024			<i>50-59</i> 0.51	
			<i>60</i> + 1.51	

DENTAL RATES OVER \rightarrow





MONTHLY RATES EFFECTIVE: JULY 1, 2024 - JUNE 30, 2025

5.g.ia 20iita					
SINGLE	14.66				
E+SPOUSE	27.13				
E+Child(ren)	31.82				
FAMILY	37.98				
Cigna DPPO Base Plan					
SINGLE	29.04				
E+SPOUSE	38.99				
E+ (1) CHILD	35.92				
FAMILY	57.30				
Cigna DPPO Buy Up					
SINGLE	53.83				
E+SPOUSE	72.26				
E+Child(ren)	66.59				

FAMILY

106.22

Cigna Dental Care Plan