

# 2021 Medical and Dental Premiums

Benefit Plan Options	Total Monthly Premium (without subsidy) for Medical, RX, and Vision combined
<b>Cigna MyChoice Plan - Non-Medicare Participants Only</b>	
Individual	\$494.06
2 Individuals	\$963.01
Family	\$1,437.40
<b>Cigna OAP 90% Co-Insurance Plan - Non-Medicare and Medicare Participants</b>	
Individual	\$761.10
Individual with Medicare	\$532.63
2 Individuals	\$1,495.44
2 Individuals - 1 with Medicare, 1 without	\$1,292.31
2 Individuals - 1 with True Choice Core Medicare Advantage Plan, 1 without	\$1,152.72
2 Individuals with Medicare	\$1,064.81
Family	\$2,199.58
Family - 1 with Medicare	\$2,053.00
Family - 1 with True Choice Core Medicare Advantage Plan (PPO)	\$1,838.39
Family - 2 with Medicare	\$1,904.21
Family - 2 with True Choice Core Medicare Advantage Plan (PPO)	\$1,545.76
Family - 3 with Medicare	\$1,755.43
<b>Cigna OAP 80% Co-Insurance Plan - Non-Medicare and Medicare Participants</b>	
Individual	\$564.09
Individual with Medicare	\$391.02
2 Individuals	\$1,099.69
2 Individuals - 1 with Medicare, 1 without	\$951.48
2 Individuals - 1 with True Choice Core Medicare Advantage Plan, 1 without	\$955.71
2 Individuals with Medicare	\$773.12
Family	\$1,641.28
Family - 1 with Medicare	\$1,534.92
Family - 1 with True Choice Core Medicare Advantage Plan (PPO)	\$1,464.06
Family - 2 with Medicare	\$1,413.80
Family - 2 with True Choice Core Medicare Advantage Plan (PPO)	\$1,348.75
Family - 3 with Medicare	\$1,292.68
<b>Kaiser Permanente HMO Plans - Non-Medicare and Medicare Participants</b>	
Individual	\$668.65
Individual with Medicare	\$306.87
2 Individuals	\$1,303.00
2 Individuals - 1 with Medicare, 1 without	\$974.10
2 Individuals with Medicare	\$612.32
Family	\$1,938.67
Family - 1 with Medicare	\$1,587.57
Family - 2 with Medicare	\$1,269.55
Family - 3 with Medicare	\$951.53
<b>Cigna True Choice Core Medicare Advantage Plan (PPO) - Medicare Participants Only</b>	
Individual	\$393.04
2 Individuals	\$784.66
Family with 3 on Medicare	\$1,177.70
<b>United Healthcare Group Medicare Advantage Plan (PPO) - Medicare Participants Only</b>	
Individual	\$423.00
2 Individuals	\$844.58
Family with 3 on Medicare	\$1,267.58
<b>Delta Dental PPO</b>	
Individual	\$43.53
2 Individuals	\$82.24
Family	\$135.53