

**TOWN OF MANCHESTER, CT  
HEALTH INSURANCE RATES  
RESIDUAL UNION EMPLOYEES**

The 2023-2024 health insurance bi-weekly cost share amounts listed below will be effective July 1, 2023 through June 30, 2024.

**Hired Prior to 07/01/04:**

	<b>SINGLE</b>	<b>DOUBLE</b>	<b>FAMILY</b>
OAP Basic	\$89.43	\$164.80	\$246.77
Cigna Choice Fund (HDHP)	\$65.64	\$118.28	\$184.35

**Hired On or After 07/01/04:**

	<b>SINGLE</b>	<b>DOUBLE</b>	<b>FAMILY</b>
OAP Basic	\$89.43	\$164.80	\$246.77
Dental	\$3.63	\$9.44	\$11.62
Cigna Choice Fund (HDHP)	\$65.64	\$118.28	\$184.35
Dental	\$3.03	\$7.87	\$9.68

Prescription co-pays: \$5/\$20/\$35 shall apply to prescriptions after the exhaustion of the HDHP deductibles.