2027 MCJHIF Medical Rates M.C.I.A

		TRAD	CHOICE	CIGNA	AETNA	OXFORD PPO	OMNIA
Medical	Single	20,271.72	14,407.92	16,689.96	14,203.80	17,232.00	10,805.88
	Parent/Child	30,407.52	21,611.88	25,034.88	21,305.64	28,552.20	16,208.88
	Employee/Spouse	44,597.64	31,697.40	36,717.84	31,248.36	37,541.40	23,773.08
	Family	58,787.88	41,782.92	48,400.80	41,190.96	49,201.92	31,337.16

2027 MCJHIF Prescription/Dental Rates M.C.I.A.

Prescription	Single	7,176.60
	Parent/Child	10,035.24
	Employee/Spouse	15,788.28
	Family	16,505.76

Delta Dental	Single	615.06
	Parent/Child	1,341.41
	Employee/Spouse	1,279.76
	Family	2,123.18

Flagship	Single	362.40
	Parent/Child(1)	707.88
	Parent/Child(ren)	1,199.16
	Employee/Spouse	707.88
	Family	1,199.16

NVA-VISION	142.92