

2023 Rates

Medical Plan Name	Plan Code Anthem	Plan Code Cigna	Single	Plus Spouse	Plus Child(rn)	Family
Anthem BCBS/Cigna PPO 70	MPP4	MG04	\$962	\$1,924	\$1,732	\$2,886
Anthem BCBS/Cigna PPO 80	MPP3	MG03	\$1,077	\$2,154	\$1,939	\$3,231
Anthem BCBS/Cigna PPO 90	MPP2	MG02	\$1,186	\$2,372	\$2,135	\$3,558
Anthem BCBS/Cigna CDHP- 20/ HSA	MHDE	MHDC	\$744	\$1,488	\$1,339	\$2,232
Anthem BCBS/Cigna CDHP- 40/HSA	MHBR	MCDG	\$658	\$1,316	\$1,184	\$1,974
Medicare Secondary Payer Plans for age 65+						
Anthem BCBS/Cigna MSP PPO 70	MS12	MGM4	\$775	\$1,550	\$1,395	\$2,325
Anthem BCBS/Cigna MSP PPO 80	MS11	MGM3	\$859	\$1,718	\$1,546	\$2,577
Anthem BCBS/Cigna MSP PPO 90	MS10	MGM2	\$948	\$1,896	\$1,706	\$2,844
Dental Plan Name	Plan Code Cigna		Single	Plus Spouse	Plus Child(rn)	Family
Preventive Dental	DDPV		\$39.00	\$78.00	\$70.00	\$117.00
Basic Dent-50/150	DD50		\$55.00	\$110.00	\$99.00	\$165.00
Dent&Ortho-25/75	DD25		\$74.00	\$148.00	\$133.00	\$222.00

2024 Rates

Medical Plan Name	Plan Code Anthem	Plan Code Cigna	Single	Plus Spouse	Plus Child(rn)	Family
Anthem BCBS/Cigna PPO 70	MPP4	MG04	\$1,000	\$2,000	\$1,800	\$3,000
Anthem BCBS/Cigna PPO 80	MPP3	MG03	\$1,131	\$2,262	\$2,036	\$3,393
Anthem BCBS/Cigna PPO 90	MPP2	MG02	\$1,245	\$2,490	\$2,241	\$3,735
Anthem BCBS/Cigna CDHP- 20/ HSA	MHDE	MHDC	\$796	\$1,592	\$1,433	\$2,388
Anthem BCBS/Cigna CDHP- 40/HSA	MHBR	MCDG	\$704	\$1,408	\$1,267	\$2,112
Medicare Secondary Payer Plans for age 65+						
Anthem BCBS/Cigna MSP PPO 70	MS12	MGM4	\$814	\$1,628	\$1,465	\$2,242
Anthem BCBS/Cigna MSP PPO 80	MS11	MGM3	\$902	\$1,804	\$1,624	\$2,705
Anthem BCBS/Cigna MSP PPO 90	MS10	MGM2	\$995	\$1,990	\$1,791	\$2,985
Dental Plan Name	Plan Code Delta		Single	Plus Spouse	Plus Child(rn)	Family
Delta Dental Basic	DDBA		\$39.00	\$78.00	\$70.00	\$117.00
Delta Dental Comprehensive	DCOM		\$55.00	\$110.00	\$99.00	\$165.00
Delta Dental Premium	DPRE		\$74.00	\$148.00	\$133.00	\$222.00

Minimum Standard - Single coverage to all eligible employees under the Consumer Directed Health Plan - 20 offered by the diocese through the Episcopal Medical Trust/Church Pension Group (CPG).

The MINIMUM medical funding per employee for 2024 equates to \$796 (medical premium at single level on CDHP-20) +\$213 (monthly HSA contribution)=\$1,009

Each parish or institution must also fund 80% of the CDHP-20 deductible at the single tier into your employee's Health Savings Account (HSA), for 2023 that amount is, \$2,560 annually or \$213 monthly.