

2026 Medical (ANTHEM and CIGNA)**Delta Dental****Monthly Premiums by Plan**

		Single	Plus One	Family	% Change over prior year
<u>CDHP PLANS</u>					
CDHP 20		1170	2106	3276	7.05
CDHP 15		1309	2356	3665	7.03
<u>PPO PLANS</u>					
PPO 80		1334	2401	3735	6.98
PPO 90		1587	2857	4444	8.03
PPO 100		1783	3209	4992	8.99
<u>MSP PLANS *</u>					
PPO MS 80		1068	1922	2990	7.02
PPO MS 90		1268	2282	3550	8.00
PPO MS 100		1426	2567	3993	9.04
EAP		4	4	4	0.00
<u>DENTAL</u>					
Delta Dental Basic		39	70	109	0.00
Delta Dental Comprehensive		55	99	154	1.93
Delta Dental Premium		74	133	207	1.44

* MSP Plans: for those over age 65 and employer has 19 or fewer employees

If your institution is eligible and you have employee or spouse of employee age 65 or over, Please contact Elaine Gilligan hr-finasst@diowestmo.org It could be a great savings on insurance premiums!