

DIOCESE OF MISSOURI HEALTH PLANS

Plan Name	2023 Annual Rates				2024 Annual Rates			Percent Increase
	Single	Plus One	Family		Single	Plus One	Family	
Anthem BCBS BlueCard PPO 100	\$13,140	\$23,652	\$36,792		\$13,800	\$24,840	\$38,640	5.02%
Anthem BCBS BlueCard PPO 90	\$12,132	\$21,840	\$33,972		\$12,744	\$22,944	\$35,688	5.05%
Anthem BCBS BlueCard PPO 80	\$11,004	\$19,812	\$30,816		\$11,556	\$20,796	\$32,352	5.00%
Anthem BCBS BlueCard PPO 70	\$9,900	\$17,820	\$27,720		\$10,392	\$18,708	\$29,100	4.98%
*Anthem BCBS CDHP-15/HSA	\$10,764	\$19,380	\$30,144		\$11,304	\$20,352	\$31,656	5.02%
*Anthem BCBS CDHP-20/HSA	\$9,012	\$16,224	\$25,236		\$9,552	\$17,196	\$26,748	5.99%
Cigna Open Access Plus PPO 100	\$13,140	\$23,652	\$36,792		\$13,800	\$24,840	\$38,640	5.02%
Cigna Open Access Plus PPO 90	\$12,132	\$21,840	\$33,972		\$12,744	\$22,944	\$35,688	5.05%
Cigna Open Access Plus PPO 80	\$11,004	\$19,812	\$30,816		\$11,556	\$20,796	\$32,352	5.00%
Cigna Open Access Plus PPO 70	\$9,900	\$17,820	\$27,720		\$10,392	\$18,708	\$29,100	4.98%
*Cigna CDHP-15/HSA	\$10,764	\$19,380	\$30,144		\$11,304	\$20,352	\$31,656	5.02%
*Cigna CDHP-20/HSA	\$9,012	\$16,224	\$25,236		\$9,552	\$17,196	\$26,748	5.99%
Cigna Employee Assistance Program	\$48	\$48	\$48		\$48	\$48	\$48	0.00%
Delta Dental Premium	NOT OFFERED				\$852	\$1,536	\$2,388	0.00%
Delta Dental Comprehensive	NOT OFFERED				\$636	\$1,140	\$1,776	0.00%
Delta Dental Basic	NOT OFFERED				\$456	\$816	\$1,272	0.00%
Cigna Dental & Orthodontia PPO	\$852	\$1,536	\$2,388		NOT OFFERED			0.00%
Cigna Basic Dental PPO	\$636	\$1,140	\$1,776		NOT OFFERED			0.00%

* **Special Note:** Diocesan policy requires the employer to contribute 100% of the applicable (single or family) CDHP deductible to a Health Savings Account.