

City of Lee's Summit

2024 Premium Rates

Medical				
Cigna Buy Up PPO Plan (\$0 Deductible)	Employee Monthly Contribution	City Monthly Contribution	Total Monthly Premium	Employee Contribution per Paycheck
Employee Only	\$189.43	\$841.30	\$1,030.73	\$87.43
Employee + Spouse or Child(ren)	\$711.07	\$1,543.28	\$2,254.34	\$328.18
Employee + Family	\$825.10	\$1,791.53	\$2,616.62	\$380.81
Cigna Base PPO Plan (\$500 Deductible)	Employee Monthly Contribution	City Monthly Contribution	Total Monthly Premium	Employee Contribution per Paycheck
Employee Only	\$93.48	\$841.30	\$934.78	\$43.14
Employee + Spouse or Child(ren)	\$514.43	\$1,543.28	\$2,057.70	\$237.43
Employee + Family	\$597.18	\$1,791.53	\$2,388.70	\$275.62
Cigna HDHP with HSA Plan	Employee Monthly Contribution	City Monthly Contribution	Total Monthly Premium	Employee Contribution per Paycheck
Employee Only	\$0.00	\$823.78	\$823.78	\$0.00
Employee + Spouse or Child(ren)	\$269.36	\$1,543.28	\$1,812.63	\$124.32
Employee + Family	\$312.63	\$1,791.53	\$2,104.15	\$144.29
Dental				
Cigna Dental Plan	Employee Monthly Contribution	City Monthly Contribution	Total Monthly Premium	Employee Contribution per Paycheck
Employee Only	\$0.00	\$38.80	\$38.80	\$0.00
Employee + Family	\$19.53	\$78.12	\$97.65	\$9.01
Vision				
MetLife Vision Plan	Employee Monthly Contribution	City Monthly Contribution	Total Monthly Premium	Employee Contribution per Paycheck
Employee Only	\$0.00	\$6.51	\$6.51	\$0.00
Employee + Family	\$3.09	\$12.36	\$15.45	\$1.43

*Note: Employee contribution per paycheck is based on 26 paychecks in 2024