

## 2024 CIGNA Plan Design and Monthly Rates



	CIGNA PLAN A		CIGNA PLAN B		CIGNA PLAN C	
	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
Deductible	Single: \$50 Family: \$150	Single: \$75 Family: \$225	Single: \$50 Family: \$150	Single: \$75 Family: \$225	Single: \$50 Family: \$150	Single: \$75 Family: \$225
Annual Plan Max	Year 1-\$750 Year 2 \$850 Year 3 \$950 Year 4 \$1050		Year 1-\$1650 Year 2 \$1750 Year 3 \$1850 Year 4 \$1850		Year 1-\$1650 Year 2 \$1750 Year 3 \$1850 Year 4 \$1850	
Diagnostic & Preventive	100%	100%	100%	100%	100%	100%
Basic Services	55%	50%	85%	80%	85%	80%
Major Services	Not Covered	Not Covered	55%	50%	55%	50%
Orthodontia	Not Covered	Not Covered	Not Covered	Not Covered	Members all ages	
Orthodontia Lifetime Max	N/A		N/A		\$1500	
Implants	Not Covered	Not Covered	50%	50%	55%	50%
Mo. Rates	CIGNA Plan A		CIGNA Plan B		CIGNA Plan C	
Single	\$33.42		\$58.76		\$63.99	
Family	\$89.72		\$162.70		\$175.39	

For Additional information, please contact Emily Lawrence NEFI Benefits Administrator at (617)924-1000 or by email at [benefits@nefi.com](mailto:benefits@nefi.com).