

AFFINITY HEALTH PROGRAM

DATE OF QUOTE

Coverage Tier

Employee Only
Employee + Spouse
Employee + Child(ren)
Family

EFFECTIVE DATE

1/1/2026

\$1,500 CLASSIC

CIGNA

\$873.18
\$1,681.76
\$1,520.05
\$2,490.36

\$2,500 CLASSIC

CIGNA

\$818.82
\$1,574.50
\$1,423.37
\$2,330.20

\$3,500 CLASSIC

CIGNA

\$768.02
\$1,474.26
\$1,333.01
\$2,180.52

Coverage Tier

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Employee + Child(ren)
Family

\$5,000 CLASSIC

CIGNA

\$720.54
\$1,380.58
\$1,248.57
\$2,040.64

\$7,350 VALUE

CIGNA

\$628.18
\$1,198.35
\$1,084.32
\$1,768.53

\$5,000 HSA

CIGNA

\$657.48
\$1,256.16
\$1,136.42
\$1,854.85

Coverage Tier

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\$1,000 CLASSIC

CIGNA

\$931.35
\$1,796.53
\$1,623.49
\$2,661.73

\$3,500 HSA

CIGNA

\$688.24
\$1,316.85
\$1,191.13
\$1,945.47

POWERED BY

