

**State of Delaware
Group Health Insurance Plan**

Double State Share Rates Effective July 1, 2024 – December 31, 2024

	Total Monthly Rate	State Pays	Employee/ Pensioner Contributions
Highmark Delaware First State Basic PPO Plan			
Employee	\$1,049.58	\$1,024.58	\$25.00
Employee & Spouse	\$2,171.54	\$2,128.10	\$43.44
Employee & Child(ren)	\$1,595.46	\$1,563.54	\$31.92
Family	\$2,714.52	\$2,660.22	\$54.30
Aetna CDH Gold Plan			
Employee	\$1,086.30	\$1,059.14	\$27.16
Employee & Spouse	\$2,252.36	\$2,196.04	\$56.32
Employee & Child(ren)	\$1,659.68	\$1,618.18	\$41.50
Family	\$2,861.42	\$2,789.88	\$71.54
Aetna HMO Plan			
Employee	\$1,095.74	\$1,060.12	\$35.62
Employee & Spouse	\$2,310.26	\$2,235.16	\$75.10
Employee & Child(ren)	\$1,676.20	\$1,621.72	\$54.48
Family	\$2,882.68	\$2,788.98	\$93.70
Highmark Delaware Comprehensive PPO Plan			
Employee	\$1,198.24	\$1,118.86	\$79.38
Employee & Spouse	\$2,486.48	\$2,321.74	\$164.74
Employee & Child(ren)	\$1,846.70	\$1,724.36	\$122.34
Family	\$3,108.44	\$2,902.50	\$205.94
Highmark Delaware Medicare Supplement for Pensioners Retired On or Prior to July 1, 2012			
Special Medicfill with Prescription	\$482.34	\$482.34	
Special Medicfill without Prescription*	\$273.46	\$273.46	
<small>*Medicare Supplement plan WITHOUT prescription is provided for Medicare Beneficiaries enrolled in Medicare Part D</small>			
Highmark Delaware Medicare Supplement for Pensioners Retired After July 1, 2012			
Special Medicfill with Prescription	\$482.34	\$458.24	\$24.10
Special Medicfill without Prescription*	\$273.46	\$259.80	\$13.66
<small>*Medicare Supplement plan WITHOUT prescription is provided for Medicare Beneficiaries enrolled in Medicare Part D</small>			