

2026 City of Jonesboro Benefit Cost Analysis

	CIGNA \$1000/80% HMO BASE PLAN							dependent coverage		
	# enrolled	Monthly Rate	2026 City Monthly Contribution	EE monthly cost	EE Cost/26	% City Share	%EE share	dependent cost	dep contribution 75%	percentage
Employee Only	15	\$930.83	\$930.83	\$0.00	\$0.00	100.00%	0.00%	\$0.00	\$0.00	\$0.00
Employee / Spouse	3	\$2,159.55	\$1,852.37	\$307.18	\$141.78	85.78%	14.22%	\$1,228.72	\$921.54	75.00%
Employee / Child(ren)	6	\$1,571.27	\$1,411.16	\$160.11	\$73.90	89.81%	10.19%	\$640.44	\$480.33	75.00%
Employee / Family	0	\$3,022.45	\$2,499.55	\$522.91	\$241.34	82.70%	17.30%	\$2,091.62	\$1,568.72	75.00%
Totals	24	\$29,868.72	\$27,986.52	\$1,882.20						

	CIGNA \$1500/100% BUY UP PLAN							dependent coverage		
		Monthly Rate	City contribution	EE monthly cost	EE Cost/26	% City Share	%EE share	dependent cost	dep contribution 75%	percentage
Employee Only	8	\$1,001.58	\$930.83	\$70.75	\$32.65	92.94%	7.06%	\$0.00	\$0.00	\$0.00
Employee / Spouse	0	\$2,323.67	\$1,922.40	\$401.27	\$185.20	82.73%	17.27%	\$1,322.09	\$991.57	75.00%
Employee / Child(ren)	0	\$1,690.66	\$1,447.64	\$243.02	\$112.16	85.63%	14.37%	\$689.08	\$516.81	75.00%
Employee / Family	0	\$3,252.12	\$2,618.74	\$633.39	\$292.33	80.52%	19.48%	\$2,250.54	\$1,687.91	75.00%
Totals	8	\$8,012.64	\$7,446.64	\$566.00				\$6,090.24	\$5,524.24	90.71%

	CIGNA DENTAL							dependent coverage		
		Monthly Rate	City contribution	EE monthly cost	EE Cost/26	% City Share	%EE share	dependent cost	dep contribution 50%	percentage
Employee Only	24	\$35.60	\$35.60	\$0.00	\$0.00	100.00%	0.00%	\$0.00	\$0.00	\$0.00
Employee / Spouse	6	\$70.59	\$35.60	\$34.99	\$16.15	50.43%	49.57%	\$34.99	\$17.50	50.00%
Employee / Child(ren)	7	\$93.40	\$35.60	\$57.80	\$26.68	38.12%	61.88%	\$57.80	\$28.90	50.00%
Employee / Family	1	\$141.80	\$35.60	\$106.20	\$49.02	25.11%	74.89%	\$106.20	\$53.10	50.00%
Totals	38	\$2,073.54	\$1,352.80	\$720.74						

	CIGNA VISION							dependent coverage		
		Monthly Rate	City contribution	EE monthly cost	EE Cost/26	% City Share	%EE share	dependent cost	dep contribution 0%	percentage
Employee Only	24	\$8.55	\$0.00	\$8.55	\$3.95	0.00%	100.00%	\$0.00	\$0.00	0.00%
Employee / Spouse	5	\$15.58	\$0.00	\$15.58	\$7.19	0.00%	100.00%	\$7.03	\$0.00	0.00%
Employee / Child(ren)	5	\$15.73	\$0.00	\$15.73	\$7.26	0.00%	100.00%	\$24.28	\$0.00	0.00%
Employee / Family	3	\$24.20	\$0.00	\$24.20	\$11.17	0.00%	100.00%	\$15.65	\$0.00	0.00%