



CULLMAN COUNTY COMMISSION

2024 HEALTH INSURANCE RATES (Effective 1/1/2024)

Regular Employee (working minimum of 30 hours per week)

Coverage	Total Monthly Cost	County Pays Monthly	Employee Pays Monthly (Pre-Tax)	Employee Semi-Monthly (Pre-Tax)
Single (M/D/V)	\$730.00	\$670.00	\$60.00	\$30.00
Family (M/D/V)	\$1650.00	\$1410.00	\$240.00	\$120.00

Covers Blue Cross Blue Shield of Alabama Medical and Dental and VSP Vision (administered by BCBS).
M=Medical; D=Dental; V=Vision

Retired Employee under Age 65 (with a minimum of 10 years' service with Cullman County):

Coverage	Total Monthly Cost	County Pays	Retiree Pays	Payment Method
Single (M/D/V)	\$730.00	\$670.00	\$60.00	Direct Debit Bank Draft to CCC
Family (M/D/V)	\$1650.00	\$1410.00	\$240.00	Direct Debit Bank Draft to CCC

Covers Blue Cross Blue Shield of Alabama Medical and Dental and VSP Vision (administered by BCBS).
M=Medical; D=Dental; V=Vision

Retired Employee over Age 65 (with a minimum of 10 years' service with Cullman County):

Coverage	Total Monthly Cost	County Pays	Retiree Pays	Payment Method
Single (M/D)	\$215.00 C+=\$181; Dental=\$34)	\$124.50	\$90.50	Direct Debit Bank Draft to CCC

Covers Blue Cross Blue Shield of Alabama Medicare C+ Supplement (medical only; no prescription drugs, no dental, no vision). Separate Blue Cross Blue Shield Dental Plan – Single Coverage Only (No Family Coverage). M=Medical; D=Dental

COBRA Rates: (Includes 2% administrative fee)

Coverage	Total Monthly Cost	County Pays	Employee Pays	Payment Method
Single (M/D)	\$744.60	\$0	\$744.60	Direct Payment to BCBS
Family (M/D)	\$1683.00	\$0	\$1683.00	Direct Payment to BCBS

Covers Blue Cross Blue Shield of Alabama Medical and Dental Insurance.
M=Medical; D=Dental