

2024 Health Insurance Plans (Effective January 1, 2024)

All Employees

Aetna Full HMO	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total	Total
	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	102.30	579.69	247.22	434.77	392.14	289.85	681.99	1363.98
Employee +1	204.60	1159.38	494.44	869.54	784.29	579.69	1363.98	2727.96
Employee + Family	289.50	1640.53	699.63	1230.40	1109.76	820.27	1930.03	3860.06

Aetna AVN HMO	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total	Total
	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	79.24	449.05	191.50	336.79	303.76	224.53	528.29	1056.58
Employee +1	158.48	898.08	383.00	673.56	607.52	449.04	1056.56	2113.12
Employee + Family	224.26	1270.78	541.95	953.09	859.65	635.39	1495.04	2990.08

Aetna OAMC PPO (\$200 Deductible)	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total	Total
	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	217.49	652.47	390.61	489.35	543.72	326.24	869.96	1739.92
Employee +1	451.72	1355.15	790.51	1018.36	1129.29	677.58	1806.87	3613.74
Employee + Family	657.30	1971.89	1150.27	1478.92	1643.24	985.95	2629.19	5258.38

Aetna HDHP OAMC PPO	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total	Total
	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	84.59	479.33	204.42	359.50	324.25	239.67	563.92	1127.84
Employee +1	169.18	958.66	408.84	719.00	648.51	479.33	1127.84	2255.68
Employee + Family	239.38	1356.52	578.51	1017.39	917.64	678.26	1595.90	3191.80

Kaiser HMO	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total	Total
	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium ²	Monthly Premium ²
Employee Only	67.30	382.34	67.30	382.34	257.97	191.67	449.64	899.28
Employee +1	134.59	763.69	325.26	573.02	515.94	382.34	898.28	1796.56
Employee + Family	190.45	1080.20	460.25	810.40	730.05	540.60	1270.65	2541.30

Kaiser HDHP	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total	Total
	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium ²	Monthly Premium ²
Employee Only	53.53	304.34	53.53	304.34	205.20	152.67	357.87	715.74
Employee +1	107.06	607.68	258.73	456.01	410.40	304.34	714.74	1429.48
Employee + Family	151.49	859.45	366.10	644.84	580.72	430.22	1010.94	2021.88

Operating Engineers PPO, Dental & Vision	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total	Total
	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	57.85	520.65	188.01	390.49	318.17	260.33	578.50	1157.00
Employee +1	115.70	1041.30	376.02	780.98	636.35	520.65	1157.00	2314.00
Employee + Family	156.20	1405.80	507.65	1054.35	859.10	702.90	1562.00	3124.00

Operating Engineers Kaiser, Dental & Vision	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total	Total
	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	51.60	464.40	167.70	348.30	283.80	232.20	516.00	1032.00
Employee +1	103.20	928.80	335.40	696.60	567.60	464.40	1032.00	2064.00
Employee + Family	134.60	1211.40	437.45	908.55	740.30	605.70	1346.00	2692.00

2024 Dental & Vision Contributions

Management, Confidential, District Attorney/County Counsel, Sheriff Sergeant	Cigna Dental PPO			
	Core Dental Plan (No max, no ortho coverage)		Management Buy up- Core plus Buy-Up (4k Ortho Coverage)	
	Employee Cost	County Cost ¹	Employee Cost	County Cost ¹
Employee Only			22.71	
Employee + 1	6.43	57.83	39.85	57.83
Employee + 2 ore more			52.32	

All other represented employee groups	Cigna Dental PPO							
	Core Dental Plan (2.5k Max)		Year 2+ Actives - Core plus Buy-Up 1 (4k Max)		Year 2+ Actives - Core plus Buy-Up 2 (4k Ortho Coverage)		Year 2+ Actives - Core plus Buy-Up 3 (4k Max & 4k Ortho Coverage)	
	Employee Cost	County Cost ¹	Employee Cost	County Cost ¹	Employee Cost	County Cost ¹	Employee Cost	County Cost ¹
Employee Only			11.98		17.18		23.42	
Employee + 1	5.19	46.67	18.86	46.67	29.77	46.67	42.88	46.67
Employee + 2 ore more			23.87		38.93		57.03	

Management, Confidential, District Attorney/County Counsel, Sheriff Sergeant	Cigna DHMO		VSP Vision Care	
	Employee cost	County cost	Employee cost	County cost
	Employee Only	2.15	19.34	
Employee + 1			0.00	8.01
Employee + 2 ore more	2.15	19.34		

	VSP Vision Care Buy-Up	
	Employee cost	County cost
Employee Only	2.79	
Employee + 1	5.85	8.01
Employee + 2 ore more	8.36	

¹The annual premiums are divided into 24 pay periods

(2) Includes Kaiser Admin Fee that County picks up.