

City of Huntington Beach
 2016 Health Premiums and Contributions
 Effective Payperiod 7/30/2016
Non-Associated/Non-Safety

Plan	Tier	Monthly Premium	Employer Monthly Contrib	Employee Monthly Contrib	Employee Bi-Weekly Contrib
Kaiser	Single	466.65	466.65	0.00	0.00
	Two-Party	1,022.11	974.36	47.75	22.04
	Family	1,343.90	1,170.04	173.86	80.24
Blue Shield HMO	Single	671.00	640.76	30.24	13.96
	Two-Party	1,466.00	974.36	491.64	226.91
	Family	1,896.00	1,170.04	725.96	335.06
Blue Shield PPO	Single	736.00	736.00	0.00	0.00
	Two-Party	1,555.00	1,135.78	419.22	193.49
	Family	1,927.00	1,314.31	612.69	282.78
Delta Dental PPO	Single	58.10	45.02	13.08	6.04
	Two-Party	108.60	85.91	22.69	10.47
	Family	143.20	122.18	21.02	9.70
Delta Care HMO	Single	30.11	30.11	0.00	0.00
	Two-Party	51.19	51.19	0.00	0.00
	Family	78.29	78.29	0.00	0.00
VSP Vision	Single	25.12	0.00	25.12	11.59
	Two-Party	25.12	0.00	25.12	11.59
	Family	25.12	0.00	25.12	11.59

Medical Opt-Out: \$466.65 per month (\$215.38 bi-weekly)