

**City of Huntington Beach**  
**2018 Health Premiums and Contributions**  
 Effective 1/1/2018  
**Ambulance Operator**

Plan	Tier	Monthly Premium	Employer Monthly Contribution	Employee Monthly Contribution	Employee Bi-Weekly Contribution
Kaiser	Single	530.00	530.00	0.00	0.00
	Two-Party	1,142.00	530.00	612.00	282.46
	Family	1,495.00	530.00	965.00	445.38
Blue Shield HMO	Single	705.00	530.00	175.00	80.77
	Two-Party	1,540.00	530.00	1,010.00	466.15
	Family	1,992.00	530.00	1,462.00	674.77
Blue Shield PPO	Single	750.00	530.00	220.00	101.54
	Two-Party	1,585.00	530.00	1,055.00	486.92
	Family	1,964.00	530.00	1,434.00	661.85
Blue Shield HDHP (high deductible health plan)	Single	551.00	530.00	21.00	9.69
	Two-Party	1,166.00	530.00	636.00	293.54
	Family	1,443.00	530.00	913.00	421.38
Delta Dental PPO	Single	56.00	30.11	25.89	11.95
	Two-Party	104.60	30.11	74.49	34.38
	Family	137.90	30.11	107.79	49.75
Delta Care HMO	Single	30.11	30.11	0.00	0.00
	Two-Party	51.19	30.11	21.08	9.73
	Family	78.29	30.11	48.18	22.24
VSP Vision	Single	23.86	0.00	23.86	11.01
	Two-Party	23.86	0.00	23.86	11.01
	Family	23.86	0.00	23.86	11.01

City's contribution matches 100% of the cost of the least expensive HMO plan for medical and dental for employee only coverage