2024 HEALTH BENEFIT RATES VERNON POLICE MANAGEMENT ASSOCIATION SECTION 125 CAFETERIA PLAN (NON-CASH OUT)

Rlue Shield Medical Full Network HMO 15/100 (High HMO)

	Blue Shie	eld Medical Full Netw	ork/	HMO 15/100 (High HMO)		
TIER		PREMIUM		CITY CONTRIBUTION		BALANCE
Emp Only	\$	876.57	\$	1,165.00	\$	(288.43)
Emp + Spouse	\$	1,652.33	\$	1,510.91	\$	141.42
Emp + Child(ren)	\$	1,498.63	\$	1,256.45	\$	242.18
Emp + Family	\$	2,329.41	\$	2,132.38	\$	197.03
		Blue Shield Trio HM	0 15	5/100 (Low HMO)		
TIER		PREMIUM		CITY CONTRIBUTION		BALANCE
Emp Only	\$	662.89	\$	1,165.00	\$	(502.11)
Emp + Spouse	\$	1,458.35	\$	1,510.91	\$	(52.56)
Emp + Child(ren)	\$	1,193.20	\$	1,256.45	\$	(63.25)
Emp + Family	\$	2,054.95	\$	2,132.38	\$	(77.43)
	Blu	e Shield Traditional I	PPO	250/750 (High PPO)		
TIER		PREMIUM		CITY CONTRIBUTION		BALANCE
Emp Only	\$	969.53	\$	1,165.00	\$	(195.47)
Emp + Spouse	\$	2,133.00	\$	1,510.91	\$	622.09
Emp + Child(ren)	\$	1,745.17	\$	1,256.45	\$	488.72
Emp + Family	\$	3,005.59	\$	2,132.38	\$	873.21
	Blue Sh	ield HDHP/HSA PPO	280	00/3200/5200 (Low PPO)		
TIER		PREMIUM		CITY CONTRIBUTION		BALANCE
Emp Only	\$	678.61	\$	915.00	\$	(236.39)
Emp + Spouse	\$	1,497.24	\$	1,260.91	\$	236.33
Emp + Child(ren)	\$	1,224.33	\$	1,006.45	\$	217.88
Emp + Family	\$	2,111.20	\$	1,882.38	\$	228.82
For amplayous aprolled	in the HDHD/L	ISA DDO plan the Cit		ill fund their HSA account a	with ¢	1 500 in January \$500

For employees enrolled in the HDHP/HSA PPO plan, the City will fund their HSA account with \$1,500 in January, \$500

in March, June, and September.

MetLife Dental - DPPO					
Emp Only	\$	60.83			
Emp + Spouse	\$	119.88			
Emp + Child(ren)	\$	146.82			
Emp + Family	\$	223.98			
MetLife Dental - DMO					
Emp Only	\$	16.68			
Emp + Spouse	\$	31.69			
Emp + Child(ren)	\$	33.35			
Emp + Family	\$	47.53			
MES Vision Plan					
Emp Only	\$	11.59			
Emp + 1 Dep	\$	20.87			
Emp + 2 or more Dep	\$	29.90			



City of Vernon Human Resources Department (323) 583-8811

In the event an employee does not exhaust or exceed their monthly medical allowance, the employee shall be allowed to apply any unsused portion towards the purchase of dental, vision, supplemental, or anciliary plans offered through the City and approved by the Director of Human Resources, in accordance with IRS Section 125, Cafeteria Plan Regulations.