The charts below summarize County and Employee benefit premiums for coverage in 2024.

MEDICAL & PRESCRIPTION COVERAGE

		Employee Bi-Weekly	Employer Bi-Weekly
Medical Mutual	Single	\$39.18	\$352.68
PPO Advantage	Family	\$105.53	\$949.79

		Employee Bi-Weekly	Employer Bi-Weekly
<u>Medical Mutual</u>	Single	\$15.27	\$290.12
MedFlex Plan	Family	\$41.12	\$781.34

		Employee Bi-Weekly	Employer Bi-Weekly
Medical Mutual	Single	\$15.02	\$235.31
<u>Maximum Value</u>	Family	\$40.45	\$633.72
<u> Plan (HSA)</u>			

DENTAL COVERAGE

MetLife Dental PPO & MAC Plans

ans		Employee Bi-Weekly	Employer Bi-Weekly	
	Single	\$0.00	\$12.90	
	Family	\$0.00	\$38.22	

VISION COVERAGE

Davis Vision		Employee Bi-Weekly	Employer Bi-Weekly
	Single	\$0.00	\$1.98
	Family	\$0.00	\$5.46

Cash Waiver Incentive Program – County employees have a cash option that may be exercised if they decline medical and prescription coverage and provide proof that they are covered under another medical plan outside the County's program. County employees that are married or a dependent to each other and elect County coverage under one employee are not eligible for the waiver. Those opting out will receive \$50 per month. You will still be eligible for the other employee benefit programs. Employees are subject to the applicable terms of their collective bargaining agreement.