

Monthly Payroll Deductions for Plan Year January 1, 2024 – December 31, 2024**

10 month employees*					
Coverage	Kaiser	United HealthCare			
		Harmony HMO	VEBA Direct HMO	Alliance 20/30 HMO	PPO
Employee Only	\$0	\$0	\$60.00	\$156.00	\$1,419.00
Employee + 1 dep.	\$193.40	\$165.40	\$282.40	\$450.40	\$2,953.40
Employee + 2 or more	\$272.40	\$224.40	\$388.40	\$618.40	\$4,136.10

12 month employees*					
Coverage	Kaiser	United HealthCare			
		Harmony HMO	VEBA Direct HMO	Alliance 20/30 HMO	PPO
Employee Only	\$0	\$0	\$50.00	\$130.00	\$1,183.00
Employee + 1 dep.	\$161.10	138.10	\$236.10	\$376.10	\$2,462.10
Employee + 2 or more	\$227.00	187.00	\$324.00	\$515.00	\$3,447.00

*These payroll deductions will pay for medical, dental and life insurance coverage for full-time contracted employees (for those with less than full-time contract, your share will be greater).

To find a United Healthcare provider go to: <https://www.whyuhc.com/csveba/health-plans>

VISION- EyeMed		
Coverage	10-month employee	12-month employee
Employee Only	\$9.83	\$8.19
Employee+ 1 dep.	\$19.58	\$16.32
Employee + 2 or more	\$29.58	\$24.58

To find an in-network EyeMed doctor go to: <https://eyedoclocator.eyemedvisioncare.com/member>

**These payroll deductions will begin on the December 15, 2023, paycheck.