

Monthly Payroll Deductions for Plan Year January 1, 2025 – December 31, 2025**

	10 month employees*				
Coverage	Kaiser	United HealthCare			
		Harmony HMO	VEBA Direct HMO	Alliance 20/30 HMO	PPO
Employee Only	\$0	\$0	\$60.00	\$170.00	\$1,490
Employee + 1 dep.	\$206.40	\$162.40	\$276.40	\$355.40	\$3,084.40
Employee + 2 or more	\$290.80	\$215.80	\$376.80	\$478.80	\$4,136.80

	12 month employees*				
Coverage	Kaiser	United HealthCare			
		Harmony HMO	VEBA Direct HMO	Alliance 20/30 HMO	PPO
Employee Only	\$0	\$0	\$50.00	\$142.00	\$1,242.00
Employee + 1 dep.	\$172.00	\$135.00	\$230.00	\$296.00	\$2,570.00
Employee + 2 or more	\$242.40	\$179.40	\$313.40	\$398.40	\$3,596.40

*These payroll deductions will pay for medical, dental, and life insurance coverage for Full-time and Part-time contracted employees.

To find a United Health Care 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 December 20, 2024, paycheck.