

# ALLOWANCE AND MONTHLY PREMIUM RATES

2024 MONTHLY BENEFITS ALLOWANCE (BASED ON NUMBER ENROLLED IN MEDICAL COVERAGE)	
Medical waiver	\$228.00
You only	\$1,105.54
You + 1 family member	\$2,017.11
You + 2 or more family members	\$2,382.84

MEDICAL PLANS	YOU ONLY	YOU + 1	YOU + 2 OR MORE
Kaiser Permanente HMO	\$897.80	\$1,798.60	\$2,085.82
UnitedHealthcare HMO	\$959.85	\$1,942.60	\$2,250.05
UnitedHealthcare Harmony HMO <sup>1</sup>	\$705.51	\$1,428.84	\$1,654.89
UnitedHealthcare Select Plus PPO	\$1,453.86	\$2,939.15	\$3,404.95
Waive coverage			

DENTAL PLANS	YOU ONLY	YOU + 1	YOU + 2 OR MORE
Delta Dental PPO	\$30.62	\$51.08	\$76.64
DeltaCare HMO <sup>2</sup>	\$14.50	\$23.92	\$35.45
MetLife (SafeGuard) HMO <sup>2</sup>	\$10.60	\$20.44	\$26.56
Waive coverage			

OPTIONAL GROUP TERM LIFE INSURANCE		
1 x Annual Salary	6 x Annual Salary	Monthly premiums are based on age and salary. The County pays 15% of the monthly premium.
2 x Annual Salary	7 x Annual Salary	
3 x Annual Salary	8 x Annual Salary	
4 x Annual Salary	No coverage	
5 x Annual Salary		

DEPENDENT TERM LIFE INSURANCE (AFTER-TAX BENEFIT) <sup>3</sup>		
Coverage (all family members)	\$5,000	\$0.83
	\$10,000	\$1.66
	\$15,000	\$2.50
	\$20,000	\$3.33
No coverage		

ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE <sup>3</sup>		
AMOUNT	YOU ONLY	YOU + FAMILY MEMBERS
\$10,000	\$0.12	\$0.24
\$25,000	\$0.31	\$0.60
\$50,000	\$0.62	\$1.19
\$100,000	\$1.24	\$2.38
\$150,000	\$1.86	\$3.57
\$200,000	\$2.48	\$4.76
\$250,000	\$3.10	\$5.95
No coverage		

MEDICAL COVERAGE PROTECTION (LTD HEALTH INSURANCE)	
LTD Health Insurance — 100%	\$4.75

FLEXIBLE SPENDING ACCOUNTS <sup>3</sup>	
Health Care Spending Account	\$10 minimum to \$254 maximum per month
Dependent Care Spending Account	\$10 minimum to \$400 maximum per month

<sup>1</sup> The UnitedHealthcare Harmony HMO is available only in eligible ZIP codes within Los Angeles, Orange, Riverside, San Bernardino, and San Diego counties.

<sup>2</sup> MetLife (SafeGuard) HMO and DeltaCare HMO are available only to employees living in the service area.

<sup>3</sup> The dependent term life, AD&D insurance, and spending accounts have different dependent eligibility requirements. See your *Options Summary Plan Description (SPD)* for details.