

DCEA and Non Represented Medical Rates 2024

| Medical - PPO | TOTAL COST (per month) | COUNTY CONTRIBUTION (per month) | EMPLOYEE COST (per month) | EMPLOYEE COST (per pay period) | EMPLOYEE COST DIFFERENCE (per pay period, from 2023) |
|-------------------------------|------------------------|---------------------------------|---------------------------|--------------------------------|--|
| Employee Only | \$ 826.42 | \$ 661.50 | \$ 164.92 | \$ 82.46 | \$ 30.61 |
| Employee + Spouse | \$ 1,652.85 | \$ 974.71 | \$ 678.14 | \$ 339.07 | \$ 61.21 |
| Employee + Child | \$ 1,473.30 | \$ 870.67 | \$ 602.63 | \$ 301.32 | \$ 54.56 |
| Employee + 2 or more Children | \$ 1,473.30 | \$ 889.56 | \$ 583.74 | \$ 291.87 | \$ 54.56 |
| Employee + Family | \$ 2,144.06 | \$ 1,279.50 | \$ 864.56 | \$ 432.28 | \$ 79.41 |

| Medical - High Deductible (HSA) | TOTAL COST (per month) | COUNTY CONTRIBUTION (per month) | EMPLOYEE COST (per month) | EMPLOYEE COST (per pay period) | EMPLOYEE COST DIFFERENCE (per pay period, from 2023) |
|---------------------------------|------------------------|---------------------------------|---------------------------|--------------------------------|--|
| Employee Only | \$ 690.97 | \$ 690.97 | \$ - | \$ - | \$ 0.16 |
| Employee + Spouse | \$ 1,377.73 | \$ 928.42 | \$ 449.31 | \$ 224.66 | \$ 51.03 |
| Employee + Child | \$ 1,231.80 | \$ 827.57 | \$ 404.23 | \$ 202.12 | \$ 45.62 |
| Employee + 2 or more Children | \$ 1,231.80 | \$ 846.46 | \$ 385.34 | \$ 192.67 | \$ 45.62 |
| Employee + Family | \$ 1,792.64 | \$ 1,215.95 | \$ 576.69 | \$ 288.35 | \$ 66.40 |

DCSPA/SBU Medical Rates 2024

| Medical - PPO | TOTAL COST (per month) | COUNTY CONTRIBUTION (per month) | EMPLOYEE COST (per month) | EMPLOYEE COST (per pay period) | EMPLOYEE COST DIFFERENCE (per pay period, from 2023) |
|-------------------------------|------------------------|---------------------------------|---------------------------|--------------------------------|--|
| Employee Only | \$ 826.42 | \$ 743.78 | \$ 82.64 | \$ 41.32 | \$ (10.53) |
| Employee + Spouse | \$ 1,652.85 | \$ 1,074.35 | \$ 578.50 | \$ 289.25 | \$ 11.39 |
| Employee + Child | \$ 1,473.30 | \$ 957.65 | \$ 515.66 | \$ 257.83 | \$ 11.08 |
| Employee + 2 or more Children | \$ 1,473.30 | \$ 957.65 | \$ 515.66 | \$ 257.83 | \$ 20.52 |
| Employee + Family | \$ 2,144.06 | \$ 1,393.64 | \$ 750.42 | \$ 375.21 | \$ 22.34 |

| Medical - High Deductible (HSA) | TOTAL COST (per month) | COUNTY CONTRIBUTION (per month) | EMPLOYEE COST (per month) | EMPLOYEE COST (per pay period) | EMPLOYEE COST DIFFERENCE (per pay period, from 2023) |
|---------------------------------|------------------------|---------------------------------|---------------------------|--------------------------------|--|
| Employee Only | \$ 690.97 | \$ 690.97 | \$ - | \$ - | \$ 0.16 |
| Employee + Spouse | \$ 1,377.73 | \$ 1,033.30 | \$ 344.43 | \$ 172.22 | \$ (1.41) |
| Employee + Child | \$ 1,231.80 | \$ 923.85 | \$ 307.95 | \$ 153.98 | \$ (2.52) |
| Employee + 2 or more Children | \$ 1,231.80 | \$ 923.85 | \$ 307.95 | \$ 153.98 | \$ 6.93 |
| Employee + Family | \$ 1,792.64 | \$ 1,344.48 | \$ 448.16 | \$ 224.08 | \$ 2.13 |