

City of Tucson 2017-2018 Employee Premiums

Medical Rates (Biweekly)

| Annual Salary | Less than \$60,000 | | | \$60,000 - \$100,000 | | | More than \$100,000 | | |
|-------------------------------|--------------------|----------|----------|----------------------|----------|----------|---------------------|----------|----------|
| Hourly Rate: | | | | | | | | | |
| Regular (2080 hr/yr) | \$0 - \$28.85 | | | \$28.86 - \$48.08 | | | \$48.09 & up | | |
| Suppression Fire (2912 hr/yr) | \$0 - \$20.61 | | | \$20.62 - \$34.34 | | | \$34.35 & up | | |
| CIGNA HMO | | | | | | | | | |
| | Employee | City | Total | Employee | City | Total | Employee | City | Total |
| Employee Only | \$29.97 | \$232.02 | \$261.99 | \$33.48 | \$228.51 | \$261.99 | \$36.88 | \$225.11 | \$261.99 |
| Employee & Spouse | \$91.26 | \$458.90 | \$550.16 | \$101.52 | \$448.64 | \$550.16 | \$111.78 | \$438.38 | \$550.16 |
| Employee & Child(ren) | \$65.07 | \$428.01 | \$493.08 | \$72.36 | \$420.72 | \$493.08 | \$79.92 | \$413.16 | \$493.08 |
| Full family | \$110.43 | \$675.58 | \$786.01 | \$122.58 | \$663.43 | \$786.01 | \$135.27 | \$650.74 | \$786.01 |
| CIGNA HRA / HSA | | | | | | | | | |
| Employee Only | \$13.50 | \$183.12 | \$196.62 | \$17.28 | \$179.34 | \$196.62 | \$21.76 | \$174.86 | \$196.62 |
| Employee & Spouse | \$50.22 | \$362.67 | \$412.89 | \$60.48 | \$352.41 | \$412.89 | \$67.12 | \$345.77 | \$412.89 |
| Employee & Child(ren) | \$34.29 | \$335.67 | \$369.96 | \$41.58 | \$328.38 | \$369.96 | \$47.79 | \$322.17 | \$369.96 |
| Full family | \$61.83 | \$528.20 | \$590.03 | \$73.98 | \$516.05 | \$590.03 | \$81.54 | \$508.49 | \$590.03 |

Dental Rates (Biweekly)

| CIGNA Dental HMO | | | | CIGNA Dental PPO | | | |
|----------------------|----------|--------|--------|----------------------|----------|---------|---------|
| | Employee | City | Total | | Employee | City | Total |
| Employee Only | \$0.00 | \$3.78 | \$3.78 | Employee Only | \$8.18 | \$8.19 | \$16.37 |
| Employee + 1 | \$0.00 | \$7.18 | \$7.18 | Employee + 1 | \$16.04 | \$16.04 | \$32.08 |
| Employee + 2 or more | \$0.00 | \$9.22 | \$9.22 | Employee + 2 or more | \$23.64 | \$23.64 | \$47.28 |

Vision Rates (Biweekly)

| AVESIS | | | |
|----------------------|----------|--------|--------|
| | Employee | City | Total |
| Employee Only | \$2.33 | \$0.00 | \$2.33 |
| Employee + 1 | \$4.09 | \$0.00 | \$4.09 |
| Employee + 2 or more | \$6.02 | \$0.00 | \$6.02 |

Medical Opt-Out *: \$36.92 per pay period

* To receive the Medical Opt Out incentive:

1. You must waive medical coverage in the online enrollment system (accessible via www.tucsonaz.gov/insurance) **and**
2. The Benefits Office must receive your properly completed Medical Opt Out form and proof of non-City coverage by the end of Open Enrollment.

If you currently receive the Medical Opt Out incentive, NEW PAPERWORK IS REQUIRED THIS YEAR.

Please see your Open Enrollment newsletter, or contact the Benefits Office for more information.