

2020 - 2021
Employee Rates
(Biweekly)

Medical (Cigna)

Base salary / hourly *	Less than \$60,000	\$0 - \$28.85 \$0 - \$20.61	\$60,000 - \$100,000	\$28.86 - \$48.08 \$20.62 - \$34.34	More than \$100,000	\$48.09 & up \$34.35 & up
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HRA & HSA

	Employee	City	Total	Employee	City	Total	Employee	City	Total
Employee	\$13.50	\$218.92	\$232.42	\$17.28	\$215.14	\$232.42	\$21.76	\$210.66	\$232.42
Employee + Spouse	\$50.22	\$437.83	\$488.05	\$60.48	\$427.57	\$488.05	\$67.12	\$420.93	\$488.05
Employee + Child(ren)	\$34.29	\$403.01	\$437.30	\$41.58	\$395.72	\$437.30	\$47.79	\$389.51	\$437.30
Family	\$61.83	\$635.61	\$697.44	\$73.98	\$623.46	\$697.44	\$81.54	\$615.90	\$697.44

Network formerly "HMO"

	Employee	City	Total	Employee	City	Total	Employee	City	Total
Employee	\$29.97	\$279.71	\$309.68	\$33.48	\$276.20	\$309.68	\$36.88	\$272.80	\$309.68
Employee + Spouse	\$91.26	\$559.04	\$650.30	\$101.52	\$548.78	\$650.30	\$111.78	\$538.52	\$650.30
Employee + Child(ren)	\$65.07	\$517.77	\$582.84	\$72.36	\$510.48	\$582.84	\$79.92	\$502.92	\$582.84
Family	\$110.43	\$818.66	\$929.09	\$122.58	\$806.51	\$929.09	\$135.27	\$793.82	\$929.09

Dental (Cigna)

	Employee	City	Total
Individual	\$0.00	\$3.93	\$3.93
Individual & 1	\$0.00	\$7.46	\$7.46
Individual & 2+	\$0.00	\$9.59	\$9.59

	Employee	City	Total
Individual	\$8.81	\$8.81	\$17.62
Individual & 1	\$17.26	\$17.27	\$34.53
Individual & 2+	\$25.44	\$25.45	\$50.89

Vision (Avesis)

	Employee	City	Total
Individual	\$2.33	\$0.00	\$2.33
Individual & 1	\$4.09	\$0.00	\$4.09
Individual & 2+	\$6.02	\$0.00	\$6.02

* Hourly Rate: Regular (2080 hr/yr)
 Suppression Fire (2912 hr/yr)

Medical Opt Out Incentive **\$36.92 biweekly**

- Waive medical in the online enrollment system (accessible via www.tucsonaz.gov/insurance) and
- Upload completed Medical Opt Out form & proof of non-City coverage