

**City of Huntington Beach**  
**2020 Health Premiums and Contributions**  
Effective 1/1/2020  
**Ambulance Operator**

Plan	Tier	Monthly Premium	Employer Monthly Contribution	Employee Monthly Contribution	Employee Bi-Weekly Contribution
Kaiser	Single	584.00	584.00	0.00	0.00
	Two-Party	1,259.00	584.00	675.00	311.54
	Family	1,648.00	584.00	1,064.00	491.08
Blue Shield HMO	Single	733.00	584.00	149.00	68.77
	Two-Party	1,602.00	584.00	1,018.00	469.85
	Family	2,072.00	584.00	1,488.00	686.77
Blue Shield PPO	Single	780.00	584.00	196.00	90.46
	Two-Party	1,649.00	584.00	1,065.00	491.54
	Family	2,043.00	584.00	1,459.00	673.38
Blue Shield HDHP (high deductible health plan)	Single	573.00	573.00	0.00	0.00
	Two-Party	1,213.00	584.00	629.00	290.31
	Family	1,501.00	584.00	917.00	423.23
Delta Dental PPO	Single	53.90	30.11	23.79	10.98
	Two-Party	100.60	30.11	70.49	32.53
	Family	132.70	30.11	102.59	47.35
Delta Care HMO	Single	30.11	30.11	0.00	0.00
	Two-Party	51.19	30.11	21.08	9.73
	Family	78.29	30.11	48.18	22.24
VSP Vision	Single	23.33	0.00	23.33	10.77
	Two-Party	23.33	0.00	23.33	10.77
	Family	23.33	0.00	23.33	10.77

City's contribution matches 100% of the cost of the least expensive HMO plan for medical and dental for employee only coverage