

# Flexible Benefits Program 2019 PLAN RATES & FLEXIBLE CREDITS

**Flexible Benefits Program Eligibility** - You are eligible if you are a regular County of Ventura employee and you have a regular Work Schedule ("Standard Hours" in VCHRP) of at least 40 hours per biweekly pay period. If you are not eligible for the Flexible Benefits Program, you may still be eligible for a medical plan. Contact County Benefits for more information – Benefits.ServiceRep@ventura.org or (805) 654-2570.

#### **County-Sponsored Plans**

### **Biweekly Premiums**

Plan Name	Premium (per biweek)
COUNTY-SPONSORED MEDICAL	
Ventura County Health Care Plan	
Employee Only	\$ 401.93
Employee + 1	\$ 458.34
Employee + 2 or more	\$ 566.83
BlueShield HMO Trio (ACO network)	
Employee Only	\$ 417.60
Employee + 1	\$ 502.29
Employee + 2 or more	\$ 601.55
BlueShield HMO Access+ (full HMO network)	
Employee Only	\$ 481.80
Employee + 1	\$ 578.26
Employee + 2 or more	\$ 691.30
BlueShield High-Deductible PPO	
Employee Only	\$ 337.51
Employee + 1	\$ 408.70
Employee + 2 or more	\$ 493.53
Medical Plan Opt-Out 1	\$ 282.73
DENTAL	
MetLife Dental PPO	
Employee Only	\$20.46
Employee + 1	\$38.99
Employee + 2 or more	\$58.97
VISION	
MES Vision Plan	
Employee Only	\$2.03
Employee + 1	\$3.66
Employee + 2 or more	\$5.24
FLEXIBLE SPENDING ACCOUNTS 2	
Health Care - Minimum \$10.00: Maximum \$110.41	

Health Care - Minimum \$10.00; Maximum \$110.41

Dependent Care - Minimum \$10.00; Maximum \$208.33

#### **Union-Sponsored Plans**

(only employees represented by the unions listed may select these plans)

#### **Biweekly Premiums**

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Plan Name	Premium (per biweek)	
VCDSA-SPONSORED MEDICAL		
Anthem Blue Cross HMO Low		
Employee Only	\$ 157.83	
Employee + 1	\$ 372.48	
Employee + 2 or more	\$ 548.10	
Anthem Blue Cross HMO High		
Employee Only	\$ 256.47	
Employee + 1	\$ 579.62	
Employee + 2 or more	\$ 844.01	
Anthem Blue Cross PPO		
Employee Only	\$ 350.69	
Employee + 1	\$ 777.49	
Employee + 2 or more	\$ 1,126.68	
Anthem Blue Cross HDHP PPO (HSA)		
Employee Only	\$ 236.40	
Employee + 1	\$ 537.47	
Employee + 2 or more	\$ 783.80	
VCPFA-SPONSORED MEDICAL		
BlueShield Low HMO Trio (narrow network)		
Employee Only	\$ 213.88	
Employee + 1 or more	\$ 518.12	
BlueShield Low HMO (full network)		
Employee Only	\$ 251.96	
Employee + 1 or more	\$ 605.06	
BlueShield High HMO (full network)		
Employee Only	\$ 309.46	
Employee + 1 or more	\$ 736.73	
BlueShield High-Deductible PPO		
Employee Only	\$ 340.71	
Employee + 1 or more	\$ 901.97	

## **Biweekly Flexible Credits**

When you enroll, you are given a Flexible Credit Allowance that you can use to purchase the benefits you wish. Your credit allowance amount is negotiated by the Bargaining Unit that represents your job classification. Part-time flex credit is for those with a regular biweekly work schedule of 40-59 hours.

Bargaining Unit	Flexible Credit Allowance
CJAAVC (part-time & full-time), IUOE, SEIU, VCPPOA Patrol Unit, VEA	\$447.00
CNA, SPOAVC, VCPPOA Probation Unit	\$397.00
VCDSA, VCPFA	\$372.00
VCSCOA	\$347.00
Part-time – CNA, SPOAVC, VCPPOA Probation Unit	\$278.00
Part-time – IUOE, MGMT, SEIU, VEA, VCPPOA Patrol Unit	\$313.00
Part-time – VCDSA	\$279.00
Part-time – VCSCOA	\$243.00
Management/Confidential Clerical/VCMC Interns & Residents/Other Unrepresented  Part-time Employees (40 to 59 hours per PP) hired or promoted to Management before 4/1/2001 - \$313.00	\$447.00

Opt Out rate will be capped at the flex credit amount if the Opt Out rate exceeds the flex credit amount

<sup>&</sup>lt;sup>2</sup> Deductions for FSAs will not be taken on any 3rd paycheck of a month (i.e. no deductions in pay periods 19/07 or 19/18).