



# 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](mailto:Benefits.ServiceRep@ventura.org) or (805) 654-2570.

### County-Sponsored Plans

#### Biweekly Premiums

Plan Name	Premium (per biweek)
<b>COUNTY-SPONSORED MEDICAL</b>	
<i>Ventura County Health Care Plan</i>	
Employee Only	\$ 401.93
Employee + 1	\$ 458.34
Employee + 2 or more	\$ 566.83
<i>BlueShield HMO Trio (ACO network)</i>	
Employee Only	\$ 417.60
Employee + 1	\$ 502.29
Employee + 2 or more	\$ 601.55
<i>BlueShield HMO Access+ (full HMO network)</i>	
Employee Only	\$ 481.80
Employee + 1	\$ 578.26
Employee + 2 or more	\$ 691.30
<i>BlueShield High-Deductible PPO</i>	
Employee Only	\$ 337.51
Employee + 1	\$ 408.70
Employee + 2 or more	\$ 493.53
<i>Medical Plan Opt-Out<sup>1</sup></i>	
	\$ 282.73
<b>DENTAL</b>	
<i>MetLife Dental PPO</i>	
Employee Only	\$20.46
Employee + 1	\$38.99
Employee + 2 or more	\$58.97
<b>VISION</b>	
<i>MES Vision Plan</i>	
Employee Only	\$2.03
Employee + 1	\$3.66
Employee + 2 or more	\$5.24
<b>FLEXIBLE SPENDING ACCOUNTS<sup>2</sup></b>	
<i>Health Care</i> - Minimum \$10.00; Maximum \$110.41	
<i>Dependent Care</i> - Minimum \$10.00; Maximum \$208.33	

<sup>1</sup> Opt Out rate will be capped at the flex credit amount if the Opt Out rate exceeds the flex credit amount

<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).

### Union-Sponsored Plans

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

#### Biweekly Premiums

Plan Name	Premium (per biweek)
<b>VCDSA-SPONSORED MEDICAL</b>	
<i>Anthem Blue Cross HMO Low</i>	
Employee Only	\$ 157.83
Employee + 1	\$ 372.48
Employee + 2 or more	\$ 548.10
<i>Anthem Blue Cross HMO High</i>	
Employee Only	\$ 256.47
Employee + 1	\$ 579.62
Employee + 2 or more	\$ 844.01
<i>Anthem Blue Cross PPO</i>	
Employee Only	\$ 350.69
Employee + 1	\$ 777.49
Employee + 2 or more	\$ 1,126.68
<i>Anthem Blue Cross HDHP PPO (HSA)</i>	
Employee Only	\$ 236.40
Employee + 1	\$ 537.47
Employee + 2 or more	\$ 783.80
<b>VCPFA-SPONSORED MEDICAL</b>	
<i>BlueShield Low HMO Trio (narrow network)</i>	
Employee Only	\$ 213.88
Employee + 1 or more	\$ 518.12
<i>BlueShield Low HMO (full network)</i>	
Employee Only	\$ 251.96
Employee + 1 or more	\$ 605.06
<i>BlueShield High HMO (full network)</i>	
Employee Only	\$ 309.46
Employee + 1 or more	\$ 736.73
<i>BlueShield High-Deductible PPO</i>	
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	\$397.00
VCDSA	\$372.00
VCPFA	\$322.00
VCPPOA Probation Unit, VCSCOA	\$347.00
Part-time – CNA, SPOAVC	\$278.00
Part-time – IUOE, MGMT, SEIU, VEA, VCPPOA Patrol Unit	\$313.00
Part-time – VCDSA	\$279.00
Part-time – VCPPOA Probation Unit, VCSCOA	\$243.00
Management/Confidential Clerical/VCMC Interns & Residents/Other Unrepresented <i>Part-time Employees (40 to 59 hours per PP) hired or promoted to Management before 4/1/2001 - \$313.00</i>	\$447.00