CITY OF COLUMBIA HEIGHTS

HEALTH INSURANCE RATE SCHEDULE + EFFECTIVE 1/1/2021 – 12/31/2021

Medica Health Insurance		Single premium (per month)	Family premium (per month)
\$15 Co-Pay Option	Passport Network	\$1,026.64	\$2,361.30
\$15 Co-Pay Option	Elect Network	\$954.78	\$2,196.01
\$15 Co-Pay Option	Vantage Plus Network	\$923.98	\$2,125.17
\$1500/\$3000 HDHP	Passport Network	\$907.45	\$2,087.15
\$1500/\$3000 HDHP	Elect Network	\$843.92	\$1,941.05
\$1500/\$3000 HDHP	Vantage Plus Network	\$816.70	\$1,878.43
\$2800/\$5600 Embedded HDHP	Passport Network	\$813.31	\$1,870.63
\$2800/\$5600 Embedded HDHP	Elect Network	\$756.38	\$1,739.69
\$2800/\$5600 Embedded HDHP	Vantage Plus Network	\$731.98	\$1,683.57

Employer Contributions	Employee Unit	Health Ins.	Life Ins.	Dental Ins.	LTD	Total
2021 Limits	IUOE (Public Works)	*	\$1.22	\$47.93	**	\$955 ¹
(per month)	LELS (Pol. Officers)	***	\$2.44	\$47.93	**	\$955 ¹
	LELS (Pol. Sergeants)	*	\$1.22	\$47.93	**	\$955 ¹
	AFSCME (Clerical/Technical)	***	\$2.44	\$47.93	**	\$955 ¹
	IAFF (Firefighters)	\$905.85	\$1.22	\$47.93	N/A	\$955 ¹
	PMA (Division Heads)	*	\$1.22	\$47.93	****	\$955 ¹
	Non-Union Supervisory	*	\$1.22	\$47.93	****	\$955 ¹
	Non-Union Ess./Conf.	*	\$1.22	\$47.93	****	\$955 ¹

* Employer contribution to insurance less \$1.22 basic life insurance + dental + LTD

** \$0.279 per \$100 of base wages; 180 day wait

*** Employer contribution to insurance less \$2.44 basic life insurance + dental + LTD

**** \$0.279 per \$100 of base wages; 90 day wait

¹Plus \$60 monthly Employer contribution to HSA with qualified HDHP; Plus \$300 per month if on a family health insurance plan.

Waiver: Union represented employees, except PMAs, covered by a group plan elsewhere may waive the City's health insurance coverage and have \$250 per month paid into their employer sponsored Deferred Compensation Plan.