## **MEDICAL PLAN RATES**

## Spousal Surcharge

If you elect Employee + Spouse or Employee + Family, your bi-weekly premium contribution will include an additional \$37.50 spousal surcharge.

| Medical Plan Biweekly Rates |                                       |                               |                                |                               |                                |                               |
|-----------------------------|---------------------------------------|-------------------------------|--------------------------------|-------------------------------|--------------------------------|-------------------------------|
| Tier                        | Consumer-Driven<br>Health Plan (CDHP) |                               | Limited<br>Network Plan        |                               | Open Access Plan               |                               |
|                             | Before<br>Wellness<br>Discount        | After<br>Wellness<br>Discount | Before<br>Wellness<br>Discount | After<br>Wellness<br>Discount | Before<br>Wellness<br>Discount | After<br>Wellness<br>Discount |
| Employee Only               | \$51.01                               | \$26.01                       | \$37.50                        | \$12.50                       | \$95.10                        | \$70.10                       |
| Employee + Children         | \$103.10                              | \$78.10                       | \$142.63                       | \$117.63                      | \$235.26                       | \$210.26                      |
| Employee + Spouse*          | \$181.58                              | \$144.08**                    | \$234.30                       | \$196.80**                    | \$357.82                       | \$320.32**                    |
| Employee + Family*          | \$233.36                              | \$196.16**                    | \$312.73                       | \$275.23**                    | \$497.99                       | \$460.49**                    |

\* Includes a \$37.50 spousal surcharge.

\*\* After Wellness Discount based upon employee AND covered spouse completing the wellness program.

## Non-Tobacco User Discount

If you and/or your dependents do not use tobacco products, you qualify for the bi-weekly nontobacco user discount of \$17.50. If you and/or any of your dependents indicated tobacco use, you will not be eligible for the non-tobacco user discount.

By enrolling and participating in a smoking/ tobacco cessation program, you may become eligible for the bi-weekly non-tobacco user discount of \$17.50.

Previously indicated tobacco users on the medical plan must participate in a smoking cessation program. Smoking/tobacco cessation programs must be facilitated or validated by the City of Houston.

## **Wellness Discount**

Each year, employees who decide to actively engage in the Wellness Program offerings are provided opportunities to receive wellness incentive discounts towards medical plan premium rates.

If you complete the City's wellness program, you receive a \$25 biweekly discount. If your covered spouse completes the City's wellness program, you receive a \$12.50 biweekly discount.

See Page 16 for more information on how you can complete Wellness in Three Easy Steps.