City of Ramsey -- 2019 Health Plans, Rates, and Draft Contributions (monthly figures)

2019 Health Insurance HeathPartners	Perform Network Premium	City Contribution to Premium	Perform Employee Cost		Open Access Network Premium	City Contribution to Premium	Open Access Employee Cost		City Contribuito n to VEBA or H.S.A.	Total City Contribution (Premium & VEBA/H.S.A.)
Single Plans										
$2500 Ded. Plan w/VEBA	$728.00	$728.00	$0.00		$743.00	$728.00	$15.00		$130.00	$858.00
$2700 Ded. Plan w/H.S.A.	$659.00	$659.00	$0.00		$672.50	$672.50	$0.00		$130.00	$789.00/$802.50
$4000 Ded. Plan w/VEBA	$642.00	$642.00	$0.00		$655.00	$655.00	$0.00		$194.00	$836.00/$849.00
$4000 Ded. Plan w/H.S.A.	$608.00	$608.00	$0.00		$620.50	$620.50	$0.00		$194.00	$802.00/$814.50
Employee + Child(ren)										
$2500 Ded. Plan w/VEBA	$1,456.00	$873.60	$582.40		$1,486.00	$873.60	$612.40		$160.00	$1,033.60
$2700 Ded. Plan w/H.S.A.	$1,317.50	$873.60	$443.90		$1,344.50	$873.60	$470.90		$160.00	$1,033.60
$4000 Ded. Plan w/VEBA	$1,283.50	$873.60	$409.90		$1,310.00	$873.60	$436.40		$160.00	$1,033.60
$4000 Ded. Plan w/H.S.A.	$1,216.00	$873.60	$342.40		$1,240.50	$873.60	$366.90		$160.00	$1,033.60
Employee + Spouse Plans										
$2500 Ded. Plan w/VEBA	$1,529.00	$917.40	$611.60		$1,560.50	$917.40	$643.10		$160.00	$1,077.40
$2700 Ded. Plan w/H.S.A.	$1,383.50	$917.40	$466.10		$1,412.00	$917.40	$494.60		$160.00	$1,077.40
$4000 Ded. Plan w/VEBA	$1,348.00	$917.40	$430.60		$1,375.50	$917.40	$458.10		$160.00	$1,077.40
$4000 Ded. Plan w/H.S.A.	$1,276.50	$917.40	$359.10		$1,302.50	$917.40	$385.10		$160.00	$1,077.40
Family Plans										
$2500 Ded. Plan w/VEBA	$1,893.00	$1,135.80	$757.20		$1,932.00	$1,135.80	$796.20		$192.00	$1,327.80
$2700 Ded. Plan w/H.S.A.	$1,713.00	$1,135.80	$577.20		$1,748.00	$1,135.80	$612.20		$192.00	$1,327.80
$4000 Ded. Plan w/VEBA	$1,669.00	$1,135.80	$533.20		$1,703.00	$1,135.80	$567.20		$192.00	$1,327.80
$4000 Ded. Plan w/H.S.A.	$1,580.50	$1,135.80	$444.70		$1,613.00	$1,135.80	$477.20		$192.00	$1,327.80
Waivers										$370.00