Municipal Executives

2021 Medical Premium Contribution Rates (Biweekly)

EMPLOYEE ONLY	BLUE SHIELD OF CA		BLUE SHIELD OF CA		KAISER PERMANENTE		UHC PPO	
	TRIO HMO		ACCESS+ HMO		HMO		(City Plan)	
CITY AND COUNTY OF SAN FRANCISCO	Employer	You	Employer	You	Employer	You	Employer	You
	Pays	Pay	Pays	Pay	Pays	Pay	Pays	Pay
Municipal Executives MEA Miscellaneous Unrepresented Managers Unrepresented Employees Elected Officials Municipal Executives MEA – Fire Municipal Executives MEA – Police	\$336.65	\$33.06	\$336.55	\$89.78	\$314.99	\$0	\$336.55	\$262.72
MUNICIPAL TRANSPORTATION AGENCY	Employer	You	Employer	You	Employer	You	Employer	You
	Pays	Pay	Pays	Pay	Pays	Pay	Pays	Pay
Municipal Executives MEA MTA Unrepresented Managers	\$336.55	\$33.06	\$336.55	\$89.78	\$314.99	\$0	\$336.55	\$262.72
SUPERIOR COURT	Employer	You	Employer	You	Employer	You	Employer	You
	Pays	Pay	Pays	Pay	Pays	Pay	Pays	Pay
Municipal Executives MEA Unrepresented Managers Court Duty Officer Courts Commissioners' Association	\$0	\$369.61	\$0	\$426.33	\$0	\$314.99	\$0	\$599.27
EMPLOYEE +1	BLUE SHIELD OF CA		BLUE SHIELD OF CA		KAISER PERMANENTE		UHC PPO	
	TRIO HMO		ACCESS+ HMO		HMO		(City Plan)	
CITY AND COUNTY OF SAN FRANCISCO	Employer	You	Employer	You	Employer	You	Employer	You
	Pays	Pay	Pays	Pay	Pays	Pay	Pays	Pay
Municipal Executives MEA Miscellaneous Unrepresented Managers Unrepresented Employees Elected Officials Municipal Executives MEA – Fire Municipal Executives MEA – Police	\$366.55	\$401.25	\$366.55	\$514.67	\$314.99	\$313.62	\$366.55	\$825.55

Municipal Executives MEA – Police								
MUNICIPAL TRANSPORTATION AGENCY	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay
Municipal Executives MEA MTA Unrepresented Managers	\$336.55	\$401.25	\$336.55	\$514.67	\$314.99	\$313.62	\$336.55	\$825.55
SUPERIOR COURT	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay
Municipal Executives MEA Unrepresented Managers Court Duty Officer Courts Commissioners' Association	\$0	\$737.80	\$0	\$851.22	\$0	\$628.61	\$0	\$1,162.10

EMPLOYEE +2 OR MORE	BLUE SHIELD OF CA TRIO HMO		BLUE SHIELD OF CA ACCESS+ HMO		KAISER PERMANENTE HMO		UHC PPO (City Plan)	
CITY AND COUNTY OF SAN FRANCISCO	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay
Municipal Executives MEA Miscellaneous Unrepresented Managers Unrepresented Employees Elected Officials Municipal Executives MEA – Fire Municipal Executives MEA – Police	\$0	\$1,043.39	\$0	\$1,203.89	\$0	\$888.90	\$0	\$1,641.98
MUNICIPAL TRANSPORTATION AGENCY	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay
Municipal Executives MEA MTA Unrepresented Managers	\$0	\$1,043.39	\$0	\$1,203.89	\$0	\$888.90	\$0	\$1,641.98
SUPERIOR COURT	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay
Municipal Executives MEA								
Unrepresented Managers Court Duty Officer	\$0	\$1,043.39	\$0	\$1,203.89	\$0	\$888.90	\$0	\$1,641.98
Courts Commissioners' Association								

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Vision Plan Benefits-at-a-Glance

Covered Services	VSP Basic ¹	VSP Premier					
Well Vision Exam	\$10 co-pay every calendar year	\$10 co-pay every calendar year					
Single Vision Lenses Lined Bifocal Lenses Lined Trifocal Lenses	 \$25 co-pay every other calendar year² \$25 co-pay every other calendar year² \$25 co-pay every other calendar year² 	\$0 every calendar year \$0 every calendar year \$0 every calendar year					
Standard Progressive Lenses Premium Progressive Lenses Custom Progressive Lenses	100% coverage every other calendar year \$95–\$105 co-pay every other calendar year \$150–\$175 co-pay every other calendar year	100% coverage every calendar year \$25 co-pay every calendar year \$25 co-pay every calendar year					
Standard Anti-Reflective Coating Premium Anti-Reflective Coating Custom Anti-Reflective Coating	\$41 co-pay every other calendar year \$58–\$69 co-pay every other calendar year \$85 co-pay every other calendar year	\$25 co-pay every calendar year \$25 co-pay every calendar year \$25 co-pay every calendar year					
Scratch-Resistant Coating	Fully covered every other calendar year	Fully Covered every calendar year					
Frames	 \$150 allowance for a wide selection of frames \$170 allowance for featured frames \$80 allowance use at Costco® \$25 co-pay applies; 20% savings on amount over the allowance; every other calendar year 	\$300 allowance for a wide selection of frames \$320 allowance for featured frames \$165 allowance at Costco® No additional co-pay; 20% savings on the amount over your allowance every calendar year					
Contacts (instead of glasses)	\$150 allowance every other calendar year ²	\$250 allowance every calendar year					
Contact Lens Exam	Up to \$60 co-pay every other calendar year ²	Up to \$60 co-pay every calendar year					
Primary Eye Care (for the treatment of urgent or acute ocular conditions)	\$5 co-pay	\$5 co-pay					
Vision Care Discounts							
Laser Vision Correction	Average 15% off regular price or 5% off promotional price; discounts only available from contracted facilities	Average 15% off regular price or 5% off promotional price; discounts only available from contracted facilities					
Vision Care Premium Rates	VSP Basic Plan	VSP Premier Contribution (Biweekly)					
	Included with your medical premium.	Employee Only \$4.85 Employee + 1 Dependent \$7.35 Employee + Family \$15.13					
Your Coverage with Out-of-Network Providers							

Visit **vsp.com** if you plan to see a provider other than a VSP network provider.

Exam	Up to \$50	Single Vision Lenses	Up to \$45	Lined Trifocal Lenses	Up to \$85	Contacto	Lip to \$105
Frame	Up to \$70	Lined Bifocal Lenses	Up to \$65	Progressive Lenses	Up to \$85	Contacts	00 10 \$105

 $^1\mbox{VSP}$ Basic Plan coverage is included with your medical premium.

²Under the VSP Basic plan, new lenses may be covered the next year if Rx change is more than .50 diopters.

IFPTE Local 21, SEIU 1021 and miscellaneous unrepresented employees are also eligible for VDT Computer VisionCare benefits. In any instance where information in this chart conflicts with the plan's Evidence of Coverage (EOC), the plan's EOC shall prevail.

Dental Premium Contribution Rates (Biweekly)

	DELTA DEN	ITAL PPO	DELTACARE	USA DHMO	UNITEDHEALTHCARE DENTAL DHMO	
CCSF & MTA MEA	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay
Employee Only	\$24.29	\$2.31	\$12.22	\$0	\$12.82	\$0
Employee +1 Dependent	\$51.24	\$4.62	\$20.16	\$0	\$21.17	\$0
Employee +2 or More Dependents	\$72.88	\$6.92	\$29.82	\$0	\$31.29	\$0
SUPERIOR COURT MEA	Employer Pays	You Pay	Employer Pays	You Pay	Employer Pays	You Pay
Employee Only	\$26.60	\$0	\$12.22	\$0	\$12.82	\$0
Employee +1 Dependent	\$55.86	\$0	\$20.16	\$0	\$21.17	\$0
Employee +2 or More Dependents	\$79.80	\$0	\$29.82	\$0	\$31.29	\$0

Eligible MEA employees of the City and County of San Francisco and Superior Court of San Francisco may apply these Flex Credit dollars to a variety of benefit options, including payment of employee medical and dental premium contributions. The amount of Flex Credits for Employees +2 or more has been increased to reflect the City's commitment to ensuring affordable health coverage for families. For more information about Flex Credits, see pages 18-19.



Flex Benefits

2021 Dollar Value of Flex Credits (Biweekly)

		EMPLOYEE +1	EMPLOYEE +2 OR MORE					
	EMPLOYEE ONLY		Blue Shield	d of California	Kaiser Permanente HMO	UHC PPO (City Plan)		
			Trio HMO	Access+ HMO				
CITY AND COUNTY OF SAN FRANCISCO								
Municipal Executives MEA Miscellaneous Unrepresented Managers Unrepresented Employees MEA Fire and Police	\$373.04	\$430.43	\$866.02	\$999.23	\$737.79	\$999.23		
MUNICIPAL TRANSPORTATION AGENCY (MTA)								
Municipal Executives MEA (MTA) Unrepresented Managers	\$373.04	\$430.43	\$866.02	\$999.23	\$737.79	\$999.23		
SUPERIOR COURT OF SAN FRANCISCO								
Municipal Executives MEA Unrepresented Managers Court Duty Officer Courts Commissioners' Association	\$1,231.00	\$1,231.00	\$1,231.00	\$1,231.00	\$1,231.00	\$1,231.00		

Eligible employees of the City and County of San Francisco and Superior Court of San Francisco may apply these Flex Credit dollars to a variety of benefit options, including payment of employee medical and dental premium contributions. The amount of Flex Credits for employees +2 or more has been increased to reflect the City's commitment to ensuring affordable health coverage for families.

How Flex Benefits Work

The City and County of San Francisco provides qualifying employees with Flex Credits, which can be spent on a variety of *pre-tax and post-tax* benefit options, paid via payroll deduction. If the premium contributions for your benefit choices cost more than your flex credits, you pay the balance from salary. If your benefits choices cost less than flex credits, you will receive cash back as taxable, nonpensionable earnings in your paycheck.

\$50,000 Group Term-Life Insurance

A \$50,000 Group Term-Life Insurance policy is also provided at no cost to employees who are eligible for flex credit benefits. You are responsible for keeping your designated beneficiaries up-to-date.

New Hires

Flex benefit enrollment is handled by **WORKTERRA**, after the employee has been enrolled by SFHSS in benefits. Flex credit benefit choices with **WORKTERRA** must be made within 30 days of a new hire's start work date. If a new hire does not enroll with **WORKTERRA** by required deadlines, payroll deductions will *automatically* be taken for any medical, dental and vision employee premium contributions. Flex credit dollars that remain after paying these premiums are paid as *taxable, non-pensionable* earnings.

Open Enrollment

During Open Enrollment, Municipal Executives may change flex benefit elections, based on available *pre-tax and post-tax* options. Flex benefit changes are administered by **WORKTERRA** and must be completed during Open Enrollment. For questions, contact **WORKTERRA** at **(866) 528-5360**.

Flex Credit Benefit Options (Except FSAs) Will Roll Forward in 2021

If you are not making any changes to benefit selections, you do not need to contact **WORKTERRA** during Open Enrollment. Your current benefit elections (except FSAs) will roll forward in 2021.

To continue making FSA contributions, or to change your benefit choices, you must contact **WORKTERRA** during Open Enrollment. Without re-enrollment, all FSA contributions will cease December 31, 2021.

Qualifying Event Changes

Members may reallocate flex credits outside of Open Enrollment if there is a qualifying event.

Leaves of Absence

If you are going on an unpaid leave of absence, you are responsible for making premium payments for your benefits while no payroll deductions are taken.