

City of Arnold 2024 Medical/Vision/Dental Costs

(Jan 1, 2024 - Dec 31, 2024)

Medical Insurance

	BASE	HIGH
Employee	\$ -	\$ 54.51
Employee & Children	\$ 128.87	\$ 217.45
Employee & Spouse	\$ 168.34	\$ 268.26
Employee & Family	\$ 336.68	\$ 483.15

Employees Electing Vision Plan 1 (VSP)

Employee	\$ 9.36
Employee & Spouse	\$ 20.16
Employee & Child(ren)	\$ 16.28
Employee, Spouse & Children	\$ 27.08

Employees Electing Vision Plan 2 (EyeMed)

Employee	\$ 8.24
Employee & Spouse	\$ 17.76
Employee & Child(ren)	\$ 14.32
Employee, Spouse & Children	\$ 23.84

Employees Electing Vision Plan 3 (Eye Care)

Employee	\$ 6.04
Employee & Spouse	\$ 13.00
Employee & Child(ren)	\$ 10.48
Employee, Spouse & Children	\$ 17.44

Employees Electing Dental Low Plan

Employee	\$ 29.08
Employee & Spouse	\$ 58.16
Employee & Child(ren)	\$ 70.72
Employee, Spouse & Children	\$ 105.20

Employees Electing Dental High Plan

Employee	\$ 47.20
Employee & Spouse	\$ 94.40
Employee & Child(ren)	\$ 115.48
Employee, Spouse & Children	\$ 171.84