



Innovative Employee Solutions

TIER 4 -5 EMPLOYEE MONTHLY COSTS

PLAN YEAR 2024-25:

Waiting Period Tier 4: 1st of the month following **60** days of employment

Waiting Period Tier 5: 1st of the month following **30** days of employment

The plans offered vary depending on geographic location.

MEDICAL - Aetna		DENTAL - Aetna	
Aetna 6050 HDHP – All		Dental PPO – All	
EE Monthly Cost			
EMPLOYEE	\$150.20	EMPLOYEE	\$42.23
EMPLOYEE + SPOUSE	\$832.26	EMPLOYEE + SPOUSE	\$84.46
EMPLOYEE + CHILDREN	\$605.43	EMPLOYEE + CHILDREN	\$95.02
EMPLOYEE + FAMILY	\$1,344.22	EMPLOYEE + FAMILY	\$137.30
Aetna 3000 HDHP – All		Dental DHMO –CA	
EE Monthly Cost		EE Monthly Cost	
EMPLOYEE	\$235.43	EMPLOYEE	\$17.41
EMPLOYEE + SPOUSE	\$1,020.06	EMPLOYEE + SPOUSE	\$34.82
EMPLOYEE + CHILDREN	\$758.53	EMPLOYEE + CHILDREN	\$34.82
EMPLOYEE + FAMILY	\$1,608.57	EMPLOYEE + FAMILY	\$56.59
Aetna 750 PPO – All		Aetna 3000 HMO – CA	
EE Monthly Cost		EE Monthly Cost	
EMPLOYEE	\$393.00	EMPLOYEE	\$165.67
EMPLOYEE + SPOUSE	\$1,366.87	EMPLOYEE + SPOUSE	\$865.50
EMPLOYEE + CHILDREN	\$1,042.28	EMPLOYEE + CHILDREN	\$632.25
EMPLOYEE + FAMILY	\$2,097.26	EMPLOYEE + FAMILY	\$1,392.83
Aetna 750 HMO – CA		Aetna AWH HMO – So Cal	
EE Monthly Cost		EE Monthly Cost	
EMPLOYEE	\$296.73	EMPLOYEE	\$220.40
EMPLOYEE + SPOUSE	\$1,155.07	EMPLOYEE + SPOUSE	\$974.25
EMPLOYEE + CHILDREN	\$868.97	EMPLOYEE + CHILDREN	\$864.99
EMPLOYEE + FAMILY	\$1,798.7	EMPLOYEE + FAMILY	\$1,523.68
Aetna AWH HMO – So Cal		VISION - Aetna	
EE Monthly Cost		EE Monthly Cost	
EMPLOYEE	\$220.40	EMPLOYEE	\$5.86
EMPLOYEE + SPOUSE	\$974.25	EMPLOYEE + SPOUSE	\$11.13
EMPLOYEE + CHILDREN	\$864.99	EMPLOYEE + CHILDREN	\$11.73
EMPLOYEE + FAMILY	\$1,523.68	EMPLOYEE + FAMILY	\$17.23

The highlighted cell above represents the lowest cost employee only medical coverage. Medical costs will be different for employees in San Francisco or Hawaii due to local mandates. Please see IES Benefits Team for more information.