# City of Atlanta

Open Enrollment 2025

**James Salmond** 

Director of Employee Benefits

**Calvin Blackburn III** 

Interim Commissioner of Human Resources





# Calendar Year 2025 – Objectives & Key Points

#### Mayor's Pillars:

A City Built for the Future

#### **Objectives:**

- Maintain competitive benefits programs.
- Ensure benefits are affordable for both the City and plan participants.
- Continue to attract and retain talent.
- Finalized contracts with new vendors who were selected during the 2023 benefits solicitation process.

#### **Key Points:**

- Open enrollment will occur during November 4<sup>th</sup> November 17<sup>th</sup>.
- All active employees <u>must</u> make a coverage election during the 2024 open enrollment process.



# Employee Support Initiatives

- No price increase on Anthem plans since January 2022.
- Taken on nearly 20% more of the shared cost than initially agreed upon for the Anthem plans.
- 3.5% COLA and retention/pay bonuses in FY2023.
- 3.5% COLA in FY2024.
- New Classification & Compensation plan with pay increases for grades 19 & below.
- 2% Enhancement for grades 20 & above.
- Minimum wage increase to \$17.50 in FY2025.

# Calendar Year 2025 - What's Changing

**Note:** newly awarded vendors are illustrated in **blue** font.

	Coverage	2024 Vendors	2025 Vendors	Enrollment as of 10/4/2024
1.	Self-Insured Medical and Prescription Drug	Anthem	Anthem	4,665
2.	Fully Insured Medical and Prescription Drug	Kaiser	Kaiser	2,432
3.	H.S.A. Fund	Anthem	Anthem	315
ა.	n.s.A. Fullu	Kaiser	Kaiser	95
4.	Fully Insured Medicare Advantage and Prescription Drug (MAPD)	Anthem	UHC	5,126
5.	Fully Insured Senior Advantage and Prescription Drug	Kaiser	Kaiser	1,758
6.	Part B Premium (Late Enrollment)	COA	COA	14
7.	Self-Insured Dental	Anthem	Cigna	11,469
8.	Fully Insured Dental	Aetna	UHC	598
9.	Vision	UHC	UHC	10,352
10.	Life and Accidental Death & Dismemberment	Anthem	Anthem	17,408
11.	Flexible Spending Account	Anthem	Anthem	891
12.	COBRA	In-house	Anthem	15
13.	Retiree Billing	In-House	Anthem	56
14.	Accident Insurance	MetLife	Cigna	585
15.	Critical Illness	MetLife	Cigna	245
16.	Hospital Indemnity	MetLife	Cigna	430

# Calendar Year 2025 - What's Changing

#### **PLAN CHANGES:**

- Medicare Advantage Prescription Drug Plans (MAPD): prescription drug out-of-pocket maximum is decreasing from \$8,000 to \$2,000 (Federal Mandate).
- **High Deductible Health Plans:** Annual deductibles are increasing e.g., single in-network deductibles are increasing by \$100 (Federal Mandate)
- All other plans: No plan design changes.

#### **COST CHANGES:**

#### **Self-Insured Medical (Anthem):**

- Active HDHP: no change to the employees' 2024 contribution dollars.
- Active POS: employee's 2024 dollars will increase by no more than \$20 single up to \$66 family bi-weekly. On average, these employees will pay 21.7% of the total conventional equivalent premium.
- Non-Medicare Retirees: retirees will pay 21.7%, 30.8% and 39.9% of premium depending on the dates of hire and retirement.

#### Fully Insured Medical (Kaiser):

- Active HDHP: maintain employees' 2024 contribution dollars.
- Active HMO: increase employee's 2024 contribution dollars by \$6 single up to \$21 family bi-weekly. On average, these employees will pay 26% of premium.
- Non-Medicare Retirees: retirees will pay 26%, 36% and 46% of premium depending on the dates of hire and retirement.

# Calendar Year 2025 - What's Changing Cont.

#### **COST CHANGES**

- Medicare Advantage Prescription Drug (MAPD): (Kaiser & UHC):
  - Medicare Retirees: retirees will pay 26%, 36% and 46% of premium depending on the dates of hire and retirement
- Self-Insured Dental (Cigna):
  - Active: maintain dollars employees paid in 2024.
  - Retirees: retirees will pay 26%, 36% and 46% of premium depending on the dates of hire and retirement.
- Fully Insured Dental (UHC):
  - Active: employees will pay 26% of premium. However, most employees will see a reduction in the dollars compared to what was paid in 2024.
  - Retirees: retirees will pay 26%, 36% and 46% of premium depending on the dates of hire and retirement.
- Fully Insured Vision (UHC):
  - Active & Retirees: no change to the employees' 2024 contribution dollars.
- Health Savings Account (H.S.A.):
  - Active: increase the fund from \$500 to \$600 for single and from \$750 to \$900 for all other tiers.

**Note:** plans for which employees' 2024 contribution dollars will not change for the 2025 plan year are illustrated in **blue** font.

# Calendar Year 2025 - What's Changing Cont.

#### **COST CHANGES**

- Life Insurance:
  - Retiree Basic Life (\$10,000): no change to the retirees' 2024 contribution dollars.
  - Grandfathered Retiree Basic Life (\$10,000): no change to the retirees' 2024 contribution dollars.
  - All other coverages: individuals will pay 100% of the cost for voluntary/supplemental life insurance.

**Note:** plans for which employees' 2024 contribution dollars will not change for the 2025 plan year are illustrated in **blue** font.

# Calendar Year 2025 – Employee Costs

#### **Active Medical and Prescription Drug – Anthem & Kaiser**

Bi-weekly Rates	2024 Employee \$	2025 Employee \$
	Anthem I	POS Plan
EE only	\$99.60	\$119.60 <b>+\$20.00</b>
EE + Child(ren)	\$174.39	\$209.41 <b>+\$35.02</b>
EE + Spouse	\$249.21	\$299.26 <b>+\$50.05</b>
Family	\$329.05	\$395.13 <b>+\$66.08</b>

2024 Employee \$	2025 Employee \$
Kaiser H	IMO Plan
\$92.49	\$98.87 <b>+\$6.38</b>
\$162.02	\$173.01 <b>+\$10.99</b>
\$231.22	\$247.16 <b>+\$15.94</b>
\$305.21	\$326.25 <b>+\$21.04</b>

Bi-weekly Rates	2024 Employee \$	2025 Employee \$
	Anthen	n HDHP
EE only	\$82.78	\$82.78 <b>+\$0.00</b>
EE + Child(ren)	\$146.35	\$146.35 <b>+\$0.00</b>
EE + Spouse	\$207.20	\$207.20 <b>+\$0.00</b>
Family	\$273.58	\$273.58 <b>+\$0.00</b>

2024 Employee \$	2025 Employee \$
Kaiser	HDHP
\$77.03	\$77.03 <b>+\$0.00</b>
\$128.07	\$128.07 <b>+\$0.00</b>
\$192.56	\$192.56 <b>+\$0.00</b>
\$254.16	\$254.16 <b>+\$0.00</b>

Health Savings Account - Annual	COA 2024	COA 2025
EE only	\$500	\$600
EE + Child(ren)	\$750	\$900
EE + Spouse	\$750	\$900
Family	\$750	\$900

#### Non-Medicare Medical and Prescription Drug – Anthem & Kaiser

	Retirees hired prior to April 1, 1986					
Monthly Rates	2024 Retiree \$	2025 Retiree \$	2024 202 Retiree \$ Retir			
	Anthem l	POS Plan	Kaiser H	MO Plan		
Retiree Only	\$215.72	\$259.05 <b>+\$43.33</b>	\$200.40	\$214.21 <b>+\$13.81</b>		
Retiree + child(ren)	\$377.84	\$453.58 <b>+\$75.74</b>	\$350.68	\$374.85 <b>+\$24.17</b>		
Retiree + Spouse/Domestic Partner	\$539.95	\$648.19 <b>+\$108.24</b>	\$500.98	\$535.50 <b>+\$34.52</b>		
Retiree + Family	\$712.95	\$855.85 <b>+\$142.90</b>	\$661.30	\$706.88 <b>+\$45.58</b>		
Beneficiary Child(ren)	\$215.72	\$259.05 <b>+\$43.33</b>	\$200.40	\$214.21 <b>+\$13.81</b>		
Survivor Only	\$215.72	\$259.05 <b>+\$43.33</b>	\$200.40	\$214.21 <b>+\$13.81</b>		
Survivor & Bene Child(ren)	\$377.84	\$453.58 <b>+\$75.74</b>	\$350.68	\$374.85 <b>+\$24.17</b>		

Retirees hired on or after April 1 1986 but retire between September 2009 through August 31, 2010							
2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$				
Anthem	POS Plan	Kaiser H	IMO Plan				
\$298.69	\$367.75 <b>+\$69.06</b>	\$277.47	\$296.60 <b>+\$19.13</b>				
\$523.16	\$643.90 <b>+\$120.74</b>	\$485.55	\$519.02 <b>+\$33.47</b>				
\$747.63	\$920.17 <b>+\$172.54</b>	\$693.66	\$741.47 <b>+\$47.81</b>				
\$987.16	\$1,214.96 <b>+\$227.80</b>	\$915.64	\$978.75 <b>+\$63.11</b>				
\$298.69	\$367.75 <b>+\$69.06</b>	\$277.47	\$296.60 <b>+\$19.13</b>				
\$298.69	\$367.75 <b>+\$69.06</b>	\$277.47	\$296.60 <b>+\$19.13</b>				
\$523.16	\$643.90 <b>+\$120.74</b>	\$485.55	\$519.02 <b>+\$33.47</b>				

#### Non-Medicare Medical and Prescription Drug – Anthem & Kaiser

	Retirees hired on or after April 1 1986 but retire September 1, 2010 or later				
Monthly Rates	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$	
	Anthem	POS Plan	Kaiser H	MO Plan	
Retiree Only	\$381.66	\$476.45 <b>+\$94.79</b>	\$354.55	\$378.99 <b>+\$24.44</b>	
Retiree + child(ren)	\$668.49	\$834.23 <b>+\$165.74</b>	\$620.43	\$663.19 <b>+\$42.76</b>	
Retiree + Spouse/Domestic Partner	\$955.30	\$1,192.15 <b>+\$236.85</b>	\$886.35	\$947.43 <b>+\$61.08</b>	
Retiree + Family	\$1,261.38	\$1,574.08 <b>+\$312.70</b>	\$1,169.99	\$1,250.63 <b>+\$80.64</b>	
Beneficiary Child(ren)	\$381.66	\$476.45 <b>+\$94.79</b>	\$354.55	\$378.99 <b>+\$24.44</b>	
Survivor Only	\$381.66	\$476.45 <b>+\$94.79</b>	\$354.55	\$378.99 <b>+\$24.44</b>	
Survivor & Bene Child(ren)	\$668.49	\$834.23 <b>+\$165.74</b>	\$620.43	\$663.19 <b>+\$42.76</b>	

#### Medicare Advantage Prescription Drug (MAPD) – Kaiser & UHC

		1986				
Monthly Rates	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$
	UHC Pa	UHC Parts A & B		UHC Part B Only		or Advantage
Retiree Only	\$49.18	\$55.90 <b>+\$6.72</b>	\$147.81	\$171.21 <b>+\$23.40</b>	\$51.74	\$55.98 <b>+\$4.24</b>
Retiree + Spouse/DP	\$98.36	\$111.80 <b>+\$13.44</b>	\$295.63	\$342.43 <b>+\$26.80</b>	\$103.48	\$111.96 <b>+\$8.48</b>
Survivor Spouse/DP Only	\$49.18	\$55.90 <b>+\$6.72</b>	\$147.81	\$171.21 <b>+\$23.40</b>	\$51.74	\$55.98 <b>+\$4.24</b>

#### Medicare Advantage Prescription Drug (MAPD) – Kaiser & UHC

		Retirees pay 36% if hired on or after April 1 1986 but retire between September 2009 through August 31, 2010					
Monthly Rates	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$		
	UHC Pa	UHC Parts A & B UHC Part B Only			Kaiser Senior Advan		
Retiree Only	\$68.09	\$77.40 <b>+\$9.31</b>	\$204.66	\$237.06 <b>+\$32.40</b>	\$71.64	\$77.51 <b>+\$5.87</b>	
Retiree + Spouse/DP	\$136.19	\$154.80 <b>+\$18.61</b>	\$409.33	\$474.13 <b>+\$64.80</b>	\$143.28	\$155.02 <b>+\$11.74</b>	
Survivor Spouse/DP Only	\$68.09	\$77.40 <b>+\$9.31</b>	\$208.26	\$237.06 <b>+\$28.80</b>	\$71.64	\$77.51 <b>+\$5.87</b>	

#### Medicare Advantage Prescription Drug (MAPD) – Kaiser & UHC

	Retirees	Retirees pay 46% if hired on or after April 1 1986 but retire September 1, 2010 or later					
Monthly Rates	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$	
	UHC Pa	UHC Parts A & B UHC Part B Onl			Kaiser Seni	or Advantage	
Retiree Only	\$87.01	\$98.90 <b>+\$11.89</b>	\$261.51	\$302.91 <b>+\$41.40</b>	\$91.54	\$99.04 <b>+\$7.50</b>	
Retiree + Spouse/DP	\$174.02	\$197.80 <b>+\$23.78</b>	\$523.03	\$605.83 <b>+\$82.80</b>	\$183.08	\$198.08 <b>+\$15.00</b>	
Survivor Spouse/DP Only	\$87.01	\$98.90 <b>+\$11.89</b>	\$261.51	\$302.91 <b>+\$41.40</b>	\$91.54	\$99.04 <b>+\$7.50</b>	

#### Split Option - Anthem BCBS POS & UHC MAPD Plan

	Retirees pay 26% hired prior t April 1, 1986		
Monthly Rates	2024 Retiree \$	2025 Retiree \$	
	Anthem l	POS Plan	
Retiree + Child(ren) – (1 Medicare)	\$254.24	\$314.95 <b>+\$60.71</b>	
Retiree + Spouse/DP (1 Medicare)	\$254.24	\$314.95 <b>+\$60.71</b>	
Retiree & Family (1 Medicare)	\$368.75	\$509.48 <b>+\$140.73</b>	
Retiree & Family (2 Medicare)	\$333.84	\$370.85 <b>+\$37.01</b>	
Survivor Only – (1 Medicare)	\$65.64	\$55.90 <b>-\$9.74</b>	
Survivor Spouse + Child(ren) – (1 Medicare)	\$254.24	\$314.95 <b>+\$60.71</b>	

Retirees pay 36% if hired on or after April 1 1986 but retire between September 2009 through August 31, 2010				
2024 Retiree \$	2025 Retiree \$			
Anthem	POS Plan			
\$352.03	\$445.15 <b>+\$93.12</b>			
\$352.03	\$445.15 <b>+\$93.12</b>			
\$510.58	\$721.30 <b>+\$210.72</b>			
\$462.24	\$522.55 <b>+\$60.31</b>			
\$90.87	\$77.40 <b>-\$13.47</b>			
\$352.03	\$445.15 <b>+\$93.12</b>			

#### Split Option - Anthem BCBS POS & UHC MAPD Plan

	Retirees pay 46% if hired on or after April 1 1986 retire September 1, 2010 or later		
Monthly Rates	2024 Retiree \$	2025 Retiree \$	
	Anthem P	OS Plan	
Retiree + Child(ren) – (1 Medicare)	\$449.81	\$575.35 <b>+\$125.54</b>	
Retiree + Spouse/DP (1 Medicare)	\$449.81	\$575.35 <b>+\$125.54</b>	
Retiree & Family (1 Medicare)	\$652.40	\$933.13 <b>+\$280.73</b>	
Retiree & Family (2 Medicare)	\$519.76	\$674.25 <b>+\$154.49</b>	
Survivor Only – (1 Medicare)	\$116.12	\$98.90 <b>-\$17.22</b>	
Survivor Spouse + Child(ren) – (1 Medicare)	\$449.81	\$575.35 <b>+\$125.54</b>	

# Calendar Year 2025 – Employee Costs

#### **Active Dental – Cigna & UHC**

Bi-weekly Rates	2024 Employee \$	2025 Employee \$
	Cigna H	igh Plan
EE only	\$3.64	\$3.64 <b>+\$0.00</b>
EE + Child(ren)	\$7.71	\$7.71 <b>+\$0.00</b>
EE + Spouse	\$7.44	\$7.44 <b>+\$0.00</b>
Family	\$12.21	\$12.21 <b>+\$0.00</b>

2024 Employee \$	2025 Employee \$
Cigna L	ow Plan
\$3.39	\$3.39 <b>+\$0.00</b>
\$6.55	\$6.55 <b>+\$0.00</b>
\$6.90	\$6.90 <b>+\$0.00</b>
\$10.41	\$10.41 <b>+\$0.00</b>

2024 Employee \$	2025 Employee \$
UHC I	DHMO
\$1.36	\$1.34 <b>-\$0.02</b>
\$2.45	\$2.62 <b>+\$0.17</b>
\$2.66	\$2.42 <b>-\$0.24</b>
\$4.09	\$4.03 <b>-\$0.06</b>

#### Retiree Dental – Cigna & UHC

	Retirees pay 26% hired prior to April 1, 1986					
Monthly Rates	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$
	Cigna H	ligh Plan	Cigna L	ow Plan	UHC	DHMO
Retiree Only	\$7.89	\$9.20 <b>+\$1.31</b>	\$7.35	\$8.64 <b>+\$1.29</b>	\$2.95	\$2.90 <b>-\$0.05</b>
Retiree + child(ren)	\$16.72	\$18.88 <b>+\$2.16</b>	\$14.20	\$16.21 <b>+\$2.01</b>	\$5.31	\$5.67 <b>+\$0.36</b>
Retiree + Spouse/Domestic Partner	\$16.12	\$18.24 <b>+\$2.12</b>	\$14.94	\$17.01 <b>+\$2.07</b>	\$5.76	\$5.23 <b>-\$0.53</b>
Retiree + Family	\$26.44	\$29.55 <b>+\$3.11</b>	\$22.56	\$25.40 <b>+\$2.84</b>	\$8.88	\$8.74 <b>-\$0.14</b>
Beneficiary Child(ren)	\$16.72	\$9.20 <b>-\$7.52</b>	\$14.20	\$8.64 <b>-\$5.56</b>	\$5.31	\$2.90 <b>-\$2.41</b>
Survivor Only	\$7.89	\$9.20 <b>+\$1.31</b>	\$7.35	\$8.64 <b>+\$1.29</b>	\$2.95	\$2.90 <b>-\$0.05</b>
Survivor & Bene Child(ren)	\$16.72	\$18.88 <b>+\$2.16</b>	\$14.20	\$16.21 <b>+\$2.01</b>	\$5.31	\$5.67 <b>+\$0.36</b>

#### Retiree Dental – Cigna & UHC

	Retirees pay 36% if hired on or after April 1 1986 but retire between September 2009 through August 31, 2010					
Monthly Rates	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$
	Cigna H	ligh Plan	Cigna L	ow Plan	UHC	DHMO
Retiree Only	\$10.93	\$12.74 <b>+\$1.81</b>	\$10.17	\$11.97 <b>+\$1.80</b>	\$4.08	\$4.02 <b>-\$0.06</b>
Retiree + child(ren)	\$23.14	\$26.15 <b>+\$3.01</b>	\$19.66	\$22.44 <b>+\$2.78</b>	\$7.35	\$7.86 <b>+\$0.51</b>
Retiree + Spouse/Domestic Partner	\$22.32	\$25.25 <b>+\$2.93</b>	\$20.68	\$23.55 <b>+\$2.87</b>	\$7.98	\$7.24 <b>-\$0.74</b>
Retiree + Family	\$36.62	\$40.91 <b>+\$4.29</b>	\$31.23	\$35.17 <b>+\$3.94</b>	\$12.30	\$12.10 <b>-\$0.20</b>
Beneficiary Child(ren)	\$23.14	\$12.74 <b>-\$10.40</b>	\$19.66	\$11.97 <b>-\$7.69</b>	\$7.35	\$4.02 <b>-\$3.33</b>
Survivor Only	\$10.93	\$12.74 <b>+\$1.81</b>	\$10.17	\$11.97 <b>+\$1.80</b>	\$4.08	\$4.02 <b>-\$0.06</b>
Survivor & Bene Child(ren)	\$23.14	\$26.15 <b>+\$3.01</b>	\$19.66	\$22.44 <b>+\$2.78</b>	\$7.35	\$7.86 <b>+\$0.51</b>

#### Retiree Dental – Cigna & UHC

Retirees pay 46% if hired on or after April 1 1986 but retire Se					ptember 1, 2010 o	later
Monthly Rates	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$	2024 Retiree \$	2025 Retiree \$
	Cigna H	ligh Plan	Cigna Lo	ow Plan	UHC	DHMO
Retiree Only	\$13.97	\$16.28 <b>+\$2.31</b>	\$13.00	\$15.29 <b>+\$2.29</b>	\$5.21	\$5.13 <b>-\$0.08</b>
Retiree + child(ren)	\$29.57	\$33.41 <b>+\$3.84</b>	\$25.13	\$28.68 <b>+\$3.55</b>	\$9.39	\$10.04 <b>+\$0.65</b>
Retiree + Spouse/Domestic Partner	\$28.52	\$32.26 <b>+\$3.74</b>	\$26.43	\$30.09 <b>+\$3.66</b>	\$10.20	\$9.26 <b>-\$0.94</b>
Retiree + Family	\$46.79	\$52.27 <b>+\$5.48</b>	\$39.91	\$44.94 <b>+\$5.03</b>	\$15.71	\$15.46 <b>-\$0.25</b>
Beneficiary Child(ren)	\$29.57	\$16.28 <b>-\$13.29</b>	\$25.13	\$15.29 <b>-\$9.84</b>	\$9.39	\$5.13 <b>-\$4.26</b>
Survivor Only	\$13.97	\$16.28 <b>+\$2.31</b>	\$13.00	\$15.29 <b>+\$2.29</b>	\$5.21	\$5.13 <b>-\$0.08</b>
Survivor & Bene Child(ren)	\$29.57	\$33.41 <b>+\$3.84</b>	\$25.13	\$28.68 <b>+\$3.55</b>	\$9.39	\$10.04 <b>+\$0.65</b>

# Calendar Year 2025 – Employee & Retiree Costs

#### **Active & Retiree Vision – UHC**

Bi-weekly Rates	2024 Employee \$	2025 Employee \$
	UHC Acti	ve Vision
EE only	\$1.51	\$1.51 <b>+\$0.00</b>
EE + Child(ren)	\$3.32	\$3.32 <b>+\$0.00</b>
EE + Spouse	\$3.16	\$3.17 <b>+\$0.01</b>
Family	\$4.28	\$4.28 <b>+\$0.00</b>

	All Retirees		
Monthly Rates	2024 Retiree \$	2025 Retiree \$	
	UHC Reti	ree Vision	
Retiree Only	\$3.27	\$3.27 <b>+\$0.00</b>	
Retiree + child(ren)	\$7.20	\$7.20 <b>+\$0.00</b>	
Retiree + Spouse/Domestic Partner	\$6.86	\$6.86 <b>+\$0.00</b>	
Retiree + Family	\$9.27	\$9.27 <b>+\$0.00</b>	
Beneficiary Child(ren)	\$7.20	\$7.20 <b>+\$0.00</b>	
Survivor Only	\$3.27	\$3.27 <b>+\$0.00</b>	
Survivor & Bene Child(ren)	\$7.20	\$7.20 <b>+\$0.00</b>	

## **Employee Scenario 1-with Class. & Comp.**

John David

**Environmental Service Worker I** 

Grade: G.14 Current Salary: \$41,960.48

Class. & Comp.: 33.93%

New Grade: GE04 New Salary: \$56,197.67

Bi-weekly Rates	2024 Employee Gross minus Medical	2025 Employee Gross minus Medical
	Anthem l	POS Plan
EE only	\$1,514.26	\$2,041.85
EE + Child(ren)	\$1,439.47	\$1,952.04
EE + Spouse	\$1,364.65	\$1,862.19
Family	\$1,284.81	\$1,766.32

2024 Employee Gross minus Medical	2025 Employee Gross minus Medical
Naiser n	IVIO PIATI
\$1,521.37	\$2,062.58
\$1,451.84	\$1,988.44
\$1,382.64	\$1,914.29
\$1,308.65	\$1,835.20

Bi-weekly Rates	2024 Employee Gross minus Medical	2025 Employee Gross minus Medical
	Anthen	1 HDHP
EE only	\$1,531.08	\$2,078.67
EE + Child(ren)	\$1,467.51	\$2,015.10
EE + Spouse	\$1,406.66	\$1,954.25
Family	\$1,340.28	\$1,887.87

2024 Employee Gross minus Medical	2025 Employee Gross minus Medical
Kaiser HDHP	
\$1,536.83	\$2,084.42
\$1,485.79	\$2,033.38
\$1,421.30	\$1,968.89
\$1,359.70	\$1,907.29

<sup>\*</sup>Scenario excludes additional pre-tax deductions and taxes

<sup>\*</sup>The above scenario is based on a recommended percentage via an employee's job duties and years of service/tenure

## **Employee Scenario 2-with 2% Enhancement**

Samuel Evans Water Utility Assistant Manager

Grade: G.21 Current Salary: \$70,813.82

2% Enhancement

New Grade: GE10 New Salary: \$72,230.10

Bi-weekly Rates	2024 Employee Gross minus Medical	2025 Employee Gross minus Medical
	Anthem l	POS Plan
EE only	\$2,624.01	\$2,658.48
EE + Child(ren)	\$2,549.22	\$2,568.67
EE + Spouse	\$2,474.40	\$2,478.82
Family	\$2,394.56	\$2,382.95

2024 Employee Gross minus Medical	2025 Employee Gross minus Medical
Kaiser H	MO Plan
\$2,631.12	\$2,679.21
\$2,561.59	\$2,605.07
\$2,492.39	\$2,530.92
\$2,418.40	\$2,451.83

Bi-weekly Rates	2024 Employee Gross minus Medical	2025 Employee Gross minus Medical
	Anthen	1 HDHP
EE only	\$2,640.83	\$2,695.30
EE + Child(ren)	\$2,577.26	\$2,631.73
EE + Spouse	\$2,516.41	\$2,570.88
Family	\$2,450.03	\$2,504.50

2024 Employee Gross minus Medical	2025 Employee Gross minus Medical
Kaiser HDHP	
\$2,646.58	\$2,701.05
\$2,595.54	\$2,650.01
\$2,531.05	\$2,585.52
\$2,469.45	\$2,523.92

<sup>\*</sup>Scenario excludes additional pre-tax deductions and taxes

# Calendar Year 2025 - Benefits Enrollment



**Open Enrollment Dates:** 

November 4th through November 17th



#### **Benefits Election:**

Active employees and retirees will be required to make all benefit selections changes through ATL Cloud Self Service. If no changes are made, all current benefits selections (with the exception of FSA and H.S.A. elections) will remain in place for the next plan year.



Open Enrollment Support is available through the following resources:

Telephonic Support Line for Active/Retirees (direct assistance from Employee Benefits Representatives) at **404.330.6036.** 

Benefits website: **Benefits.atlantaga.gov.** 

Email Box: **Benefits@atlantaga.gov.** 

# THANK YOU!

