

WORKING ON YOUR TAXES?

OCEA payroll deduction amounts for membership dues, voluntary insurance plans, other benefit programs, OCEA POPL, and agency fees for 2017.

OCEA ANNUAL MEMBERSHIP DUES (County & Court)

Note: Members of OCEA affiliates or contract associations should contact OCEA benefits staff.

Full-Time: **\$299.82** Part-Time or Extra-Help: **\$150.04**

DENTAL DHMO—DELTACARE CAM 42

	Health & Welfare Participants (Option 1)	Health & Welfare Participants (Option 2)	Health & Welfare Participants (Option 3)	Non-Health & Welfare Enrollee	Retiree
Member only	\$85.80	\$85.80	\$262.34	\$262.34	\$262.32
Member plus 1 dependent	\$119.60	\$119.60	\$497.64	\$497.64	\$497.52
Member plus 2 or more dependents	\$319.80	\$319.80	\$732.94	\$732.94	\$732.84

DELTA DENTAL DPO PLAN A+

	Health & Welfare Participants (Option 1)	Health & Welfare Participants (Option 2)	Health & Welfare Participants (Option 3)	Non-Health & Welfare Enrollee	
Member only	\$345.02	\$345.02	\$471.90	\$728.00	
Member plus 1 dependent	\$917.54	\$917.54	\$1,044.42	\$1,300.52	
Member plus 2 or more dependents	\$1,740.18	\$1,740.18	\$1,867.32	\$2,123.16	

VISION SERVICE PLAN INSURANCE

	Health & Welfare Participants (Option 1)	Health & Welfare Participants (Option 2)	Health & Welfare Participants (Option 3)	Non-Health & Welfare Enrollee	Retiree
Member only	no charge	no charge	\$61.20	\$110.64	\$110.76
Member plus 1 dependent	\$49.68	\$49.68	\$110.88	\$160.32	\$160.44
Member plus 2 or more dependents	\$176.64	\$176.64	\$238.08	\$287.52	\$287.52

Pre-Paid Legal Insurance: Basic Plan: **\$179.52** Basic Plan with 24-hour coverage: **\$191.52** Extended Plan: **\$287.52**
Fairshare fee payers: Full-Time: **\$233.68** Part-Time: **\$116.84**
OCEA Peace Officer Protective League members: **\$396** (in addition to OCEA dues deduction)



ORANGE COUNTY EMPLOYEES ASSOCIATION

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