

## 2024 Rate Chart For Active Employees

Budgeted Positions at more than 20 hours per week

This Chart applies to all Employees whose positions are represented by any of the following units:

**ALL ACTIVE CITY EMPLOYEES**

Excludes Agencies: HACM, MEDC, WCD

**An employee's deduction will be taken monthly on the first paycheck of the month.**

2024 Employee VISION PLAN Payroll Contribution.

VISION PLAN MET LIFE	Employee Monthly Rate
Single	\$ 7.45
Employee + Spouse	\$ 15.51
Employee + Child(ren)	\$ 13.13
Family	\$ 21.65

City of Milwaukee  
DER/Employee Benefits Division  
Rates include a 2% Admin Fee

2024 COBRA VISION PREMIUM RATES	
Single	\$ 7.60
Employee + Spouse	\$ 15.82
Employee + Child(ren)	\$ 13.39
Family	\$ 22.08

City of Milwaukee  
DER/Employee Benefits Division  
COBRA DISABILITY EXTENSION RATES

2024 COBRA VISION PREMIUM RATES		
Single	\$	11.18
Employee + Spouse	\$	23.27
Employee + Child(ren)	\$	19.70
Family	\$	32.48
<b>Rates Include a 50% Admin Fee</b>		