

## 2022 Health Insurance Rates

Region 3 Los Angeles, Riverside San Bernardino

FIRE MANAGEMENT UNIT						
Monthly City's Monthly Employee's Employee's Pay						
	Premium	Contribution	Monthly Contribution	Period Contribution		
ANTHEM HMO SELECT						
<ul><li>Single</li></ul>	\$676.48	\$655.50	\$20.98	\$10.49		
■ Two Party	\$1,352.96	\$1,239.70	\$113.26	\$56.63		
■ Family	\$1,758.85	\$1,583.31	\$175.54	\$87.77		
ANTHEM HMO TRADITIONAL						
■ Single	\$935.57	\$655.51	\$280.06	\$140.03		
■ Two Party	\$1,871.14	\$1,239.70	\$631.44	\$315.72		
<ul><li>Family</li></ul>	\$2,432.48	\$1,583.30	\$849.18	\$424.59		
BLUE SHIELD ACCESS +						
■ Single	\$779.87	\$655.51	\$124.36	\$62.18		
■ Two Party	\$1,559.74	\$1,239.70	\$320.04	\$160.02		
<ul><li>Family</li></ul>	\$2,027.66	\$1,583.30	\$444.36	\$222.18		
BLUE SHIELD TRIO						
<ul><li>Single</li></ul>	\$668.13	\$655.51	\$12.62	\$6.31		
■ Two Party	\$1,336.26	\$1,239.70	\$96.56	\$48.28		
<ul><li>Family</li></ul>	\$1,737.14	\$1,583.30	\$153.84	\$76.92		
HEALTH NET SALUD Y MAS						
<ul><li>Single</li></ul>	\$463.87	\$463.87	\$0.00	\$0.00		
■ Two Party	\$927.74	\$927.74	\$0.00	\$0.00		
■ Family	\$1,206.06	\$1,206.06	\$0.00	\$0.00		
HEALTH NET SMARTCARE						
■ Single	\$764.96	\$655.50	\$109.46	\$54.73		
■ Two Party	\$1,529.92	\$1,239.70	\$290.22	\$145.11		
■ Family	\$1,988.90	\$1,583.30	\$405.60	\$202.80		

FINAL CITY MONTHLY CONTRIBUTIONS MAY BE SUBJECT TO NEGOTIATIONS AND APPROVAL BY CITY COUNCIL



## 2022 Health Insurance Rates

## **Region 3**Los Angeles, Riverside San Bernardino

FIRE MANAGEMENT UNIT						
	Monthly Premium	City's Monthly Contribution	Employee's Monthly Contribution	Employee's Pay Period Contribution		
KAISER PERMANENTE						
■ Single	\$719.78	\$655.50	\$64.28	\$32.14		
■ Two Party	\$1,439.56	\$1,239.70	\$199.86	\$99.93		
<ul><li>Family</li></ul>	\$1,871.43	\$1,583.31	\$288.12	\$144.06		
PERS GOLD						
■ Single	\$575.56	\$575.56	\$0.00	\$0.00		
■ Two Party	\$1,151.12	\$1,151.12	\$0.00	\$0.00		
■ Family	\$1,496.46	\$1,496.46	\$0.00	\$0.00		
PERS PLATINUM						
<ul><li>Single</li></ul>	\$863.37	\$655.51	\$207.86	\$103.93		
■ Two Party	\$1,726.74	\$1,239.70	\$487.04	\$243.52		
<ul><li>Family</li></ul>	\$2,244.76	\$1,583.30	\$661.46	\$330.73		
PORAC						
<ul><li>Single</li></ul>	\$775.00	\$655.50	\$119.50	\$59.75		
■ Two Party	\$1,475.00	\$1,239.70	\$235.30	\$117.65		
■ Family	\$1,894.00	\$1,583.30	\$310.70	\$155.35		
UNITED HEALTHCARE ALLIANCE						
<ul><li>Single</li></ul>	\$771.85	\$655.51	\$116.34	\$58.17		
■ Two Party	\$1,543.70	\$1,239.70	\$304.00	\$152.00		
<ul><li>Family</li></ul>	\$2,006.81	\$1,583.31	\$423.50	\$211.75		
UNITED HEALTHCARE HARMONY						
<ul><li>Single</li></ul>	\$714.28	\$655.50	\$58.78	\$29.39		
■ Two Party	\$1,428.56	\$1,239.70	\$188.86	\$94.43		
■ Family	\$1,857.13	\$1,583.31	\$273.82	\$136.91		