



# 2022 Health Insurance Rates

## Region 3

Los Angeles, Riverside San Bernardino

| FIREFIGHTER UNIT       |                 |                             |                                 |                                    |
|------------------------|-----------------|-----------------------------|---------------------------------|------------------------------------|
|                        | Monthly Premium | City's Monthly Contribution | Employee's Monthly Contribution | Employee's Pay Period Contribution |
| ANTHEM HMO SELECT      |                 |                             |                                 |                                    |
| ▪ Single               | \$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                           |
| ▪ Family               | \$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                           |
| ▪ Family               | \$2,027.66      | \$1,583.30                  | \$444.36                        | \$222.18                           |
| BLUE SHIELD TRIO       |                 |                             |                                 |                                    |
| ▪ Single               | \$668.13        | \$655.51                    | \$12.62                         | \$6.31                             |
| ▪ Two Party            | \$1,336.26      | \$1,239.70                  | \$96.56                         | \$48.28                            |
| ▪ Family               | \$1,737.14      | \$1,583.30                  | \$153.84                        | \$76.92                            |
| HEALTH NET SALUD Y MAS |                 |                             |                                 |                                    |
| ▪ Single               | \$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



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| KAISER PERMANENTE          |                 |                             |                                 |                                    |
| ▪ Single                   | \$719.78        | \$655.50                    | \$64.28                         | \$32.14                            |
| ▪ Two Party                | \$1,439.56      | \$1,239.70                  | \$199.86                        | \$99.93                            |
| ▪ Family                   | \$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              |                 |                             |                                 |                                    |
| ▪ Single                   | \$863.37        | \$655.51                    | \$207.86                        | \$103.93                           |
| ▪ Two Party                | \$1,726.74      | \$1,239.70                  | \$487.04                        | \$243.52                           |
| ▪ Family                   | \$2,244.76      | \$1,583.30                  | \$661.46                        | \$330.73                           |
| PORAC                      |                 |                             |                                 |                                    |
| ▪ Single                   | \$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 |                 |                             |                                 |                                    |
| ▪ Single                   | \$771.85        | \$655.51                    | \$116.34                        | \$58.17                            |
| ▪ Two Party                | \$1,543.70      | \$1,239.70                  | \$304.00                        | \$152.00                           |
| ▪ Family                   | \$2,006.81      | \$1,583.31                  | \$423.50                        | \$211.75                           |
| UNITED HEALTHCARE HARMONY  |                 |                             |                                 |                                    |
| ▪ Single                   | \$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                           |

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