



2022 Health Insurance Retiree Rates

Region 3

Los Angeles, Riverside San Bernardino, Ventura

FIREFIGHTER UNIT					
	Monthly Premium	City's Monthly Contribution 20+ Years of Service	Employee's Monthly Cost 20+ Years of Service	City's Monthly Contribution 10-19 Years of Service	Employees Monthly Cost 10-19 Years of Service
ANTHEM HMO SELECT					
▪ Single	\$676.48	\$655.50	\$20.98	\$327.75	\$348.73
▪ Two Party	\$1,352.96	\$655.50	\$697.46	\$327.75	\$1,025.21
▪ Family	\$1,758.85	\$655.50	\$1,103.35	\$327.75	\$1,431.10
ANTHEM HMO TRADITIONAL					
▪ Single	\$935.57	\$655.50	\$280.07	\$327.75	\$607.82
▪ Two Party	\$1,871.13	\$655.50	\$1,215.63	\$327.75	\$1,543.38
▪ Family	\$2,432.48	\$655.50	\$1,776.98	\$327.75	\$2,104.73
BLUE SHIELD ACCESS +					
▪ Single	\$779.87	\$655.50	\$124.37	\$327.75	\$452.12
▪ Two Party	\$1,559.74	\$655.50	\$904.24	\$327.75	\$1,231.99
▪ Family	\$2,027.66	\$655.50	\$1,372.16	\$327.75	\$1,699.91
BLUE SHIEL TRIO					
▪ Single	\$668.13	\$655.50	\$12.63	\$327.75	\$340.38
▪ Two Party	\$1,336.26	\$655.50	\$680.76	\$327.75	\$1,008.51
▪ Family	\$1,737.14	\$655.50	\$1,081.64	\$327.75	\$1,409.39
HEALTH NET SALUD Y MAS					
▪ Single	\$463.87	\$412.88	\$50.99	\$206.44	\$257.43
▪ Two Party	\$927.74	\$412.88	\$514.86	\$206.44	\$721.30
▪ Family	\$1,206.06	\$412.88	\$793.18	\$206.44	\$999.62
HEALTH NET SMARTCARE					
▪ Single	\$764.96	\$655.50	\$109.46	\$327.75	\$437.21
▪ Two Party	\$1,529.92	\$655.50	\$874.42	\$327.75	\$1,202.17
▪ Family	\$1,988.90	\$655.50	\$1,333.40	\$327.75	\$1,661.15
KAISER PERMANENTE					
▪ Single	\$719.78	\$655.50	\$64.28	\$327.75	\$392.03
▪ Two Party	\$1,439.56	\$655.50	\$784.06	\$327.75	\$1,111.81
▪ Family	\$1,871.43	\$655.50	\$1,215.93	\$327.75	\$1,543.68

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



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PERS GOLD					
▪ Single	\$575.56	\$575.56	\$0.00	\$287.78	\$287.78
▪ Two Party	\$1,151.12	\$575.56	\$575.56	\$287.78	\$863.34
▪ Family	\$1,496.46	\$575.56	\$920.90	\$287.78	\$1,208.68
PERS PLATINUM					
▪ Single	\$863.37	\$655.50	\$207.87	\$327.75	\$535.62
▪ Two Party	\$1,726.74	\$655.50	\$1,071.24	\$327.75	\$1,398.99
▪ Family	\$2,244.76	\$655.50	\$1,589.26	\$327.75	\$1,917.01
PORAC					
▪ Single	\$775.00	\$655.50	\$119.50	\$327.75	\$447.25
▪ Two Party	\$1,475.00	\$655.50	\$819.50	\$327.75	\$1,147.25
▪ Family	\$1,894.00	\$655.50	\$1,238.50	\$327.75	\$1,566.25
UNITED HEALTHCARE ALLIANCE					
▪ Single	\$771.85	\$655.50	\$116.35	\$327.75	\$444.10
▪ Two Party	\$1,543.70	\$655.50	\$888.20	\$327.75	\$1,215.95
▪ Family	\$2,006.81	\$655.50	\$1,351.31	\$327.75	\$1,679.06
UNITED HEALTHCARE HARMONY					
▪ Single	\$714.28	\$655.50	\$58.78	\$327.75	\$386.53
▪ Two Party	\$1,428.56	\$655.50	\$773.06	\$327.75	\$1,100.81
▪ Family	\$1,857.13	\$655.50	\$1,201.63	\$327.75	\$1,529.38

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