

# City of Fullerton

## 2022 Health Insurance Rates

CONFIDENTIAL/NON REPRESENTED UNIT				
	Monthly Premium	City's Monthly Contribution	Employee's Monthly Contribution	Employee's Pay Period Contribution
CIGNA CHOICE FUND OPEN ACCESS PLUS HSA 3000 PPO PLAN				
▪ Single	\$1,164.45	\$500.01	\$664.44	\$332.22
▪ Two Party	\$2,451.83	\$1,000.01	\$1,451.82	\$725.91
▪ Family	\$3,506.29	\$1,400.01	\$2,106.28	\$1,053.14
CIGNA FULL NETWORK HMO				
▪ Single	\$911.25	\$500.01	\$411.24	\$205.62
▪ Two Party	\$1,913.64	\$1,000.00	\$913.64	\$456.82
▪ Family	\$2,733.78	\$1,400.00	\$1,333.78	\$666.89
CIGNA SELECT NETWORK HMO				
▪ Single	\$737.51	\$500.01	\$237.50	\$118.75
▪ Two Party	\$1,548.79	\$1,000.01	\$548.78	\$274.39
▪ Family	\$2,212.53	\$1,400.01	\$812.52	\$406.26
KAISER HMO				
▪ Single	\$706.03	\$500.01	\$206.02	\$103.01
▪ Two Party	\$1,412.06	\$1,000.00	\$412.06	\$206.03
▪ Family	\$1,998.06	\$1,400.00	\$598.06	\$299.03
DELTA DENTAL PPO				
▪ Single	\$52.72	\$45.78	\$6.94	\$3.47
▪ Two Party	\$105.44	\$45.78	\$59.66	\$29.83
▪ Family	\$131.80	\$45.78	\$86.02	\$43.01
DELTA DENTAL HMO				
▪ Single	\$15.52	\$15.52	\$0.00	\$0.00
▪ Two Party	\$31.03	\$31.03	\$0.00	\$0.00
▪ Family	\$45.78	\$45.78	\$0.00	\$0.00
VSP				
▪ Single	\$8.05	\$8.05	\$0.00	\$0.00
▪ Two Party	\$12.21	\$12.21	\$0.00	\$0.00
▪ Family	\$22.31	\$22.31	\$0.00	\$0.00

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