## Health Premium Rate Chart – Effective January 1, 2025



**Full-Time, Mayor, and City Council** Monthly Allowance **\$2,414.73** <u>Region 3</u> w/Cafeteria Cap per MOU/Resolution Monthly Allowance **\$2,461.17** <u>Region 2</u> w/Cafeteria Cap per MOU/Resolution

CALPERS Eligible Part-Time Employees with 8 years plus - Monthly Allowance \$471 per MOU

CALPERS Eligible Part-Time and Temp - Monthly Allowance \$157 per MOU

## Basic Premiums – Region 3 (Los Angeles, Riverside and San Bernardino counties)

HMO Health Plans	Employee Only	Employee + 1	Family Rate
Anthem Blue Cross Select	\$919.08	\$1,838.16	\$2,389.61
Anthem Blue Cross Traditional	\$1,068.02	\$2,136.03	\$2,776.85
Blue Shield Access+	\$830.47	\$1,660.94	\$2,159.22
Blue Shield Trio	\$739.88	\$1,479.76	\$1,923.70
Health Net Salud y Más	\$716.11	\$1,432.23	\$1,861.90
Kaiser	\$928.74	\$1,857.49	\$2,414.73
UnitedHealthcare Alliance	\$868.48	\$1,736.96	\$2,258.05
UnitedHealthcare Harmony	\$758.10	\$1,516.19	\$1,971.05
PPO Health Plans	<b>Employee Only</b>	Employee + 1	Family Rate
PERS Platinum	\$1,266.76	\$2,533.53	\$3,293.59
PERS Gold	\$870.23	\$1,740.47	\$2,262.61

## Basic Premiums – Region 2 (Other Southern CA counties)

HMO Health Plans	Employee Only	Employee + 1	Family Rate
Anthem Blue Cross Select	\$921.21	\$1,842.41	\$2,395.13
Anthem Blue Cross Traditional	\$1,113.64	\$2,227.27	\$2,895.45
Blue Shield Access+	\$950.81	\$1,901.61	\$2,472.10
Blue Shield Trio	\$911.28	\$1,822.56	\$2,369.33
Health Net Salud y Más	\$825.47	\$1,650.93	\$2,146.21
Kaiser	\$946.61	\$1,893.21	\$2,461.17
Sharp Performance Plus	\$870.53	\$1,741.07	\$2,263.39
UnitedHealthcare Alliance	\$892.80	\$1,785.60	\$2,321.28
UnitedHealthcare Harmony	\$821.61	\$1,643.21	\$2,136.17
PPO Health Plans	Employee Only	Employee + 1	Family Rate
PERS Platinum	\$1,261.78	\$2,523.56	\$3,280.63
PERS Gold	\$866.83	\$1,733.65	\$2,253.75

Dental/Vision	Employee Only	Employee + 1	Family Rate
Principal Dental	\$97.00	\$97.00	\$97.00
Superior Vision	\$6.04	\$10.88	\$15.72

\*COBRA Fee 2%

