

**City of Huntington Beach**  
 2016 Health Premiums and Contributions  
 Effective 1/1/2016  
**Non-Associated Safety**

Plan	Tier	Monthly Premium	Employer Monthly Contrib	Employee Monthly Contrib	Employee Bi-Weekly Contrib
PERS Anthem HMO Select	Single	634.75	440.76	193.99	89.53
	Two-Party	1,269.50	774.36	495.14	228.53
	Family	1,650.35	970.04	680.31	313.99
PERS Anthem HMO Traditional	Single	710.79	440.76	270.03	124.63
	Two-Party	1,421.58	774.36	647.22	298.72
	Family	1,848.05	970.04	878.01	405.24
PERS Blue Shield Access+	Single	654.87	440.76	214.11	98.82
	Two-Party	1,309.74	774.36	535.38	247.10
	Family	1,702.66	970.04	732.62	338.13
PERS Blue Shield NetValue	Single	666.35	440.76	225.59	104.12
	Two-Party	1,332.70	774.36	558.34	257.70
	Family	1,732.51	970.04	762.47	351.91
PERS Health Net Salud y Mas	Single	535.98	440.76	95.22	43.95
	Two-Party	1,071.96	774.36	297.60	137.35
	Family	1,393.55	970.04	423.51	195.47
PERS Health Net SmartCare	Single	596.98	440.76	156.22	72.10
	Two-Party	1,193.96	774.36	419.60	193.66
	Family	1,552.15	970.04	582.11	268.67
PERS Kaiser	Single	605.05	440.76	164.29	75.83
	Two-Party	1,210.10	774.36	435.74	201.11
	Family	1,573.13	970.04	603.09	278.35
PERS UnitedHealthcare	Single	493.99	440.76	53.23	24.57
	Two-Party	987.98	774.36	213.62	98.59
	Family	1,284.37	970.04	314.33	145.08
PERS Choice	Single	683.71	550.48	133.23	61.49
	Two-Party	1,367.42	935.78	431.64	199.22
	Family	1,777.65	1,114.31	663.34	306.16
PERS Select	Single	625.20	550.48	74.72	34.49
	Two-Party	1,250.40	935.78	314.62	145.21
	Family	1,625.52	1,114.31	511.21	235.94
PERS Care	Single	761.50	550.48	211.02	97.39
	Two-Party	1,523.00	935.78	587.22	271.02
	Family	1,979.90	1,114.31	865.59	399.50
PORAC	Single	699.00	550.48	148.52	68.55
	Two-Party	1,399.00	935.78	463.22	213.79
	Family	1,789.00	1,114.31	674.69	311.40
Delta Dental PPO	Single	58.10	45.02	13.08	6.04
	Two-Party	108.60	85.91	22.69	10.47
	Family	143.20	122.18	21.02	9.70
Delta Care HMO	Single	30.11	30.11	0.00	0.00
	Two-Party	51.19	51.19	0.00	0.00
	Family	78.29	78.29	0.00	0.00
VSP Vision	Single	25.12	0.00	25.12	11.59
	Two-Party	25.12	0.00	25.12	11.59
	Family	25.12	0.00	25.12	11.59

Medical Opt Out Benefit: \$440.76 per month (\$203.43 bi-weekly)

CalPERS PEMHCA 2016 employer contribution: \$125.00 per month (\$57.69 bi-weekly)

Employee and City Contributions subject to change as a result of contract negotiations

Other Southern California Region: Fresno, Imperial, Inyo, Kern, King, Madera, Riverside, Orange, San Diego, San Luis Obispo, Santa Barbara, Tulare