

CITY OF PACIFIC GROVE
 REGION 1 MONTHLY HEALTH INSURANCE PREMIUM RATES
 EFFECTIVE JANUARY 1, 2020

PERS-CARE					
COVERAGE PLAN	CODE	HEALTH	DENTAL	VISION	TOTAL
EMPLOYEE ONLY	3271	\$ 1,133.14	\$ 37.90	\$ 13.92	\$ 1,184.96
EMPLOYEE & 1 DEP	3272	\$ 2,266.28	\$ 75.18	\$ 29.93	\$ 2,371.39
EMPLOYEE & 2 OR MORE DEP	3273	\$ 2,946.16	\$ 94.81	\$ 29.93	\$ 3,070.90

PERS-CHOICE					
COVERAGE PLAN	CODE	HEALTH	DENTAL	VISION	TOTAL
EMPLOYEE ONLY	3221	\$ 861.18	\$ 37.90	\$ 13.92	\$ 913.00
EMPLOYEE & 1 DEP	3222	\$ 1,722.36	\$ 75.18	\$ 29.93	\$ 1,827.47
EMPLOYEE & 2 OR MORE DEP	3223	\$ 2,239.07	\$ 94.81	\$ 29.93	\$ 2,363.81

PERS-SELECT					
COVERAGE PLAN	CODE	HEALTH	DENTAL	VISION	TOTAL
EMPLOYEE ONLY	531	\$ 520.29	\$ 37.90	\$ 13.92	\$ 572.11
EMPLOYEE & 1 DEP	532	\$ 1,040.58	\$ 75.18	\$ 29.93	\$ 1,145.69
EMPLOYEE & 2 OR MORE DEP	533	\$ 1,352.75	\$ 94.81	\$ 29.93	\$ 1,477.49

ANTHEM HMO SELECT					
COVERAGE PLAN	CODE	HEALTH	DENTAL	VISION	TOTAL
EMPLOYEE ONLY	4701	\$ 868.98	\$ 37.90	\$ 13.92	\$ 920.80
EMPLOYEE & 1 DEP	4702	\$ 1,737.96	\$ 75.18	\$ 29.93	\$ 1,843.07
EMPLOYEE & 2 OR MORE DEP	4703	\$ 2,259.35	\$ 94.81	\$ 29.93	\$ 2,384.09

PORAC					
COVERAGE PLAN	CODE	HEALTH	DENTAL	VISION	TOTAL
EMPLOYEE ONLY	2071	\$ 774.00	\$ 37.90	\$ 15.10	\$ 827.00
EMPLOYEE & 1 DEP	2072	\$ 1,699.00	\$ 75.18	\$ 29.93	\$ 1,804.11
EMPLOYEE & 2 OR MORE DEP	2073	\$ 2,199.00	\$ 94.81	\$ 29.93	\$ 2,323.74

KAISER					
COVERAGE PLAN	CODE	HEALTH	DENTAL	VISION	TOTAL
EMPLOYEE ONLY	3071	\$ 768.49	\$ 37.90	\$ 13.92	\$ 820.31
EMPLOYEE & 1 DEP	3072	\$ 1,536.98	\$ 75.18	\$ 29.93	\$ 1,642.09
EMPLOYEE & 2 OR MORE DEP	3073	\$ 1,998.07	\$ 94.81	\$ 29.93	\$ 2,122.81

Health Care Plans available for purchase from CalPERS
 Dental Plan available for purchase from Dental Dental
 Vision Plan available for purchase from VSP

City benefit effective January 2020

Employer Contribution - \$1,200 per month for GEA/MEA members enrolled in medical, dental and vision plans
 Employer Contribution - Up to \$1,200 per month for POA members enrolled in medical
 Employer pays required PEMCHA in the amount of \$139 per month for medical