# 2019 Monthly Contributions & Premiums - Full Time

### **Cafeteria & Medical Allowance Contributions**

Association/Bargaining Unit	Cafeteria	a Allowance	Medical Allowance
	Contribution	Opt-Out Contribution	(must enroll in a health plan to receive)  Contribution
CEA, K&M & Prof/Tech	\$1,725.00	\$1,000.00	\$136.00
FMA	\$1,824.00	\$1,000.00	\$136.00
FA	\$1,624.00	\$1,000.00	\$136.00
League	\$1,724.00	\$1,000.00	\$136.00
LMA	\$1,624.00	\$1,000.00	\$136.00
PA & PMA	\$1,524.00	\$1,000.00	\$136.00

2018/2019 Monthly Premium Rates Comparison - Full Time

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

PERS HMO Plans	2018	2019	2018	2019	2018	2019
Medical Plan	Single		2-Party		Family	
Anthem Select HMO	\$659.69	\$625.07	\$1,319.38	\$1,250.14	\$1,715.19	\$1,625.18
Anthem Traditional HMO	\$735.08	\$830.89	\$1,470.16	\$1,661.78	\$1,911.21	\$2,160.31
Blue Shield Access+ HMO	\$695.97	\$760.04	\$1,391.94	\$1,520.08	\$1,809.52	\$1,976.10
Health Net Salud y Mas HMO	\$461.56	\$427.81	\$923.12	\$855.62	\$1,200.06	\$1,112.31
Health Net SmartCare HMO	\$607.68	\$642.71	\$1,215.36	\$1,285.42	\$1,579.97	\$1,671.05
Kaiser (CA) HMO	\$666.80	\$628.63	\$1,333.60	\$1,257.26	\$1,733.68	\$1,634.44
Sharp HMO	\$618.14	\$593.66	\$1,236.28	\$1,187.32	\$1,607.16	\$1,543.52
UnitedHealthcare HMO	\$616.66	\$646.65	\$1,233.32	\$1,293.30	\$1,603.32	\$1,681.29

#### **PERS PPO Plans**

Medical Plan	Single		2-Party		Family	
PERS Choice PPO	\$698.96	\$721.11	\$1,397.92	\$1,442.22	\$1,817.30	\$1,874.89
PERS Select PPO	\$654.74	\$462.71	\$1,309.48	\$925.42	\$1,702.32	\$1,203.05
PERS Care PPO	\$733.50	\$1,045.55	\$1,467.00	\$2,091.10	\$1,907.10	\$2,718.43
PORAC	\$734.00	\$774.00	\$1,540.00	\$1,623.00	\$1,970.00	\$2,076.00

## 2018/2019 Monthly Premium Rates Comparison - Full Time

#### Los Angeles Area - Los Angeles, San Bernardino and Ventura Counties:

You may choose from one of the following plans if you reside in one of the Los Angeles Area counties AND wish to receive your medical services in the same county.

PERS HMO Plans	2018	2019	2018	2019	2018	2019
Medical Plan	Single		2-Party		Family	
Anthem Select HMO	\$660.17	\$627.07	\$1,320.34	\$1,254.14	\$1,716.44	\$1,630.38
Anthem Traditional HMO	\$784.72	\$878.48	\$1,569.44	\$1,756.96	\$2,040.27	\$2,284.05
Blue Shield Access+ HMO	\$613.29	\$669.75	\$1,226.58	\$1,339.50	\$1,594.55	\$1,741.35
Health Net Salud y Mas HMO	\$404.32	\$356.50	\$808.64	\$713.00	\$1,051.23	\$926.90
Health Net SmartCare HMO	\$577.15	\$584.27	\$1,154.30	\$1,168.54	\$1,500.59	\$1,519.10
Kaiser (CA) HMO	\$642.70	\$618.64	\$1,285.40	\$1,237.28	\$1,671.02	\$1,608.46
UnitedHealthcare HMO	\$602.78	\$669.61	\$1,205.56	\$1,339.22	\$1,567.23	\$1,740.99

#### **PERS PPO Plans**

Medical Plan	Single		2-Party		Family	
PERS Choice PPO	\$620.39	\$654.50	\$1,240.78	\$1,309.00	\$1,613.01	\$1,701.70
PERS Select PPO	\$573.21	\$420.77	\$1,146.42	\$841.54	\$1,490.35	\$1,094.00
PERS Care PPO	\$673.73	\$843.78	\$1,347.46	\$1,687.56	\$1,751.70	\$2,193.83
PORAC	\$734.00	\$774.00	\$1,540.00	\$1,623.00	\$1,97.00	\$2,076.00

#### **Dental & Vision Plans**

#### All California Regions/Counties

Dental/Vision Plan	Single		2-Party		Family	
Cigna Dental DHMO	\$13.32	\$14.00	\$23.96	\$25.19	\$36.07	\$37.92
Cigna Dental PPO	\$54.69	\$57.94	\$111.30	\$117.91	\$153.05	\$162.14
MES PPO Vision	\$7.30	\$7.30	\$13.99	\$13.99	\$19.99	\$19.99