

Staff/Faculty/MPP/Confidential
Health Plan Premium Rates
January 1, 2010- December 31, 2010

Health Plan Name	Plan Code	Gross Premium	University Contribution	Employee Cost/ mo.
Blue Shield HMO				
Employee only	2051	\$517.09	\$493.00	\$24.09
Employee & 1 dep.	2052	\$1,034.18	\$936.00	\$98.18
Employee & 2 or more dependents	2053	\$1,344.43	\$1,202.00	\$142.43
Blue Shield NetValue				
Employee only	421	\$447.82	\$447.82	\$0.00
Employee & 1 dep.	422	\$895.64	\$895.64	\$0.00
Employee & 2 or more dependents	423	\$1,164.33	\$1,164.33	\$0.00
Kaiser				
Employee only	561	\$494.99	\$493.00	\$1.99
Employee & 1 dep.	562	\$989.98	\$936.00	\$53.98
Employee & 2 or more dependents	563	\$1,286.97	\$1,202.00	\$84.97
PERS - Care (PPO)				
Employee only	2781	\$831.50	\$493.00	\$338.50
Employee & 1 dep.	2782	\$1,663.00	\$936.00	\$727.00
Employee & 2 or more dependents	2783	\$2,161.90	\$1,202.00	\$959.90
PERS - Choice (PPO)				
Employee only	2221	\$487.25	\$487.25	\$0.00
Employee & 1 dep.	2222	\$974.50	\$936.00	\$38.50
Employee & 2 or more dependents	2223	\$1,266.85	\$1,202.00	\$64.85
PERS Select (PPO)				
Employee only	451	\$454.87	\$454.87	\$0.00
Employee & 1 dep.	452	\$909.74	\$909.74	\$0.00
Employee & 2 or more dependents	453	\$1,182.66	\$1,182.66	\$0.00
PORAC*				
Employee only	2071	\$484.00	\$484.00	\$0.00
Employee & 1 dep.	2072	\$906.00	\$906.00	\$0.00
Employee & 2 or more dependents	2073	\$1,151.00	\$1,151.00	\$0.00

* This plan is restricted to Unit 8 employees and requires membership in PORAC.