

**City of Huntington Beach  
2020 Health Premiums and Contributions**

Effective 1/1/2020

**Non-Associated Safety**

Plan	Tier	Monthly Premium	Employer Monthly Contrib	Employee Monthly Contrib	Employee Bi-Weekly Contrib
PERS Anthem HMO Select	Single	654.04	625.07	28.97	13.37
	Two-Party	1,308.08	974.36	333.72	154.02
	Family	1,700.50	1,170.04	530.46	244.83
PERS Anthem HMO Traditional	Single	934.95	640.76	294.19	135.78
	Two-Party	1,869.90	974.36	895.54	413.33
	Family	2,430.87	1,170.04	1,260.83	581.92
PERS Blue Shield Access+	Single	909.87	640.76	269.11	124.20
	Two-Party	1,819.74	974.36	845.38	390.18
	Family	2,365.66	1,170.04	1,195.62	551.82
PERS Health Net Salud y Mas	Single	435.14	427.81	7.33	3.38
	Two-Party	870.28	855.62	14.66	6.77
	Family	1,131.36	1,112.31	19.05	8.79
PERS Health Net SmartCare	Single	719.26	640.76	78.50	36.23
	Two-Party	1,438.52	974.36	464.16	214.23
	Family	1,870.08	1,170.04	700.04	323.10
PERS Kaiser	Single	645.24	628.63	16.61	7.67
	Two-Party	1,290.48	974.36	316.12	145.90
	Family	1,677.62	1,170.04	507.58	234.27
PERS UnitedHealthcare	Single	671.60	640.76	30.84	14.23
	Two-Party	1,343.20	974.36	368.84	170.23
	Family	1,746.16	1,170.04	576.12	265.90
PERS Choice	Single	736.28	721.11	15.17	7.00
	Two-Party	1,472.56	1,135.78	336.78	155.44
	Family	1,914.33	1,314.31	600.02	276.93
PERS Select	Single	451.54	451.54	0.00	0.00
	Two-Party	903.08	903.08	0.00	0.00
	Family	1,174.00	1,174.00	0.00	0.00
PERS Care	Single	986.66	750.48	236.18	109.01
	Two-Party	1,973.32	1,135.78	837.54	386.56
	Family	2,565.32	1,314.31	1,251.01	577.39
PORAC	Single	749.00	749.00	0.00	0.00
	Two-Party	1,499.00	1,499.00	0.00	0.00
	Family	1,960.00	1,960.00	0.00	0.00
Delta Dental PPO	Single	53.90	45.02	8.88	4.10
	Two-Party	100.60	85.91	14.69	6.78
	Family	132.70	122.18	10.52	4.86
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	23.33	0.00	23.33	10.77
	Two-Party	23.33	0.00	23.33	10.77
	Family	23.33	0.00	23.33	10.77

Medical Opt Out Benefit: \$749.00 per month (\$345.69 bi-weekly)

CalPERS PEMHCA 2019 employer contribution: \$136.00 per month (\$62.77 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, Orange, San Diego, San Luis Obispo, Santa Barbara, Tulare, Ventura