

City Health Plans/Carrier	Fully Insured or Self Insured	Current Enrollment	Current Annual Premium	Current Monthly Rates by Tier	City Monthly Contribution
Kaiser POS Plan	Fully Insured				
Employee Only		1	\$ 18,283.44	\$ 1,523.62	\$ 683.00
Employee + 1		1	\$ 32,911.56	\$ 2,742.63	\$ 1,240.00
Employee + Family		0	\$ 43,880.16	\$ 3,656.68	\$ 1,652.00
Kaiser HDHP/HSA	Fully Insured				
Employee Only		59	\$ 7,550.04	\$ 629.17	\$ 683.00
Employee + 1		28	\$ 13,590.12	\$ 1,132.51	\$ 1,240.00
Employee + Family		154	\$ 18,120.00	\$ 1,510.00	\$ 1,652.00
Kaiser HMO	Fully Insured				
Employee Only		203	\$ 8,538.96	\$ 711.58	\$ 683.00
Employee + 1		114	\$ 15,371.52	\$ 1,280.96	\$ 1,240.00
Employee + Family		252	\$ 20,493.36	\$ 1,707.78	\$ 1,652.00
Kaiser PPO	Fully Insured				
Surviving Spouse Only		1	\$ 28,970.64	\$ 2,414.22	\$ 2,414.22
Sutter Health Plus HDHP	Fully Insured				
Employee Only		28	\$ 7,672.68	\$ 639.39	\$ 683.00
Employee + 1		18	\$ 13,811.40	\$ 1,150.95	\$ 1,240.00
Employee + Family		61	\$ 18,414.60	\$ 1,534.55	\$ 1,652.00
Sutter Health Plus HMO	Fully Insured				
Employee Only		127	\$ 8,663.88	\$ 721.99	\$ 683.00
Employee + 1		82	\$ 15,605.40	\$ 1,300.45	\$ 1,240.00
Employee + Family		187	\$ 20,818.20	\$ 1,734.85	\$ 1,652.00
Delta Dental DHMO	Fully Insured				
Employee Only		68	\$ 235.20	\$ 19.60	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + 1		33	\$ 453.60	\$ 37.80	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + Family		48	\$ 990.48	\$ 82.54	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Delta Dental DPPO	Self Insured				
Employee Only		363	\$ 702.36	\$ 58.53	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + 1		226	\$ 1,404.84	\$ 117.07	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + Family		680	\$ 1,826.16	\$ 152.18	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Vision (VSP)	Self Insured				
Employee Only		433	\$ 94.92	\$ 7.91	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + 1		260	\$ 190.08	\$ 15.84	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + Family		727	\$ 246.84	\$ 20.57	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Group Life (Reliance Standard) - all employees		1507	\$ 134,100.36	\$ 11,175.03	\$ 11,175.03
Group AD&D (Reliance Standard) - select groups		422	premium included in figure above		
Long Term Disability (Reliance Standard)		932	\$ 451,113.96	\$ 37,592.83	\$ 37,592.83
Flexible Spending Account (P&A) - \$3.40 monthly fee per employee		208	\$ -		N/A
Commuter Benefits (P&A) - \$3.25 monthly fee per employee		6	\$ -		N/A
EAP (Halcyon)		1505	\$ -		
Number of Employees Waived City Health Plan	N/A	275	N/A	N/A	N/A
Health Savings Account (P&A)		290	\$ -		
Subsidy - Employee Only			\$ -		\$ 1,000.00 *1 time; new accounts only
Subsidy - Employee plus 1/family			\$ -		\$ 2,000.00 *1 time; new accounts only
Health Reimbursement Account (O&M & Water Supervisory Units)			\$ -		5.5% of base salary
Volunteer Products (MetLife)			\$ -		
Supplemental Term Life & AD&D		520	\$ -		
Short Term Disability		178	\$ -		
Accident		379	\$ -		
Critical Illness		238	\$ -		
Hospital Indemnity		177	\$ -		

City Health Plans/Carrier	Fully Insured or Self Insured	2020 Enrollment	2020 Annual Premium	2020 Monthly Rates by Tier	City Monthly Contribution
Anthem Blue Cross PPO	Self Insured				
Employee Only		28	\$ 12,901.92	\$ 1,075.16	\$ 670.00
Employee + 1		13	\$ 23,224.20	\$ 1,935.35	\$ 1,216.00
Employee + Family		30	\$ 30,970.68	\$ 2,580.89	\$ 1,620.00
Kaiser HDHP/HSA	Fully Insured				
Employee Only		70	\$ 7,272.72	\$ 606.06	\$ 670.00
Employee + 1		38	\$ 13,090.92	\$ 1,090.91	\$ 1,216.00
Employee + Family		173	\$ 17,454.48	\$ 1,454.54	\$ 1,620.00
Kaiser HMO	Fully Insured				
Employee Only		211	\$ 8,224.20	\$ 685.35	\$ 670.00
Employee + 1		109	\$ 14,804.88	\$ 1,233.74	\$ 1,216.00
Employee + Family		229	\$ 19,737.84	\$ 1,644.82	\$ 1,620.00
Sutter Health Plus HDHP	Fully Insured				
Employee Only		32	\$ 7,499.28	\$ 624.94	\$ 670.00
Employee + 1		18	\$ 13,498.08	\$ 1,124.84	\$ 1,216.00
Employee + Family		59	\$ 17,996.64	\$ 1,499.72	\$ 1,620.00
Sutter Health Plus HMO	Fully Insured				
Employee Only		116	\$ 8,466.36	\$ 705.53	\$ 670.00
Employee + 1		66	\$ 15,249.00	\$ 1,270.75	\$ 1,216.00
Employee + Family		160	\$ 20,341.32	\$ 1,695.11	\$ 1,620.00
Delta Dental DHMO	Fully Insured				
Employee Only		79	\$ 235.20	\$ 19.60	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + 1		32	\$ 453.60	\$ 37.80	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + Family		51	\$ 990.48	\$ 82.54	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Delta Dental DPPO	Self Insured				
Employee Only		378	\$ 696.12	\$ 58.01	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + 1		212	\$ 1,392.36	\$ 116.03	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + Family		600	\$ 1,809.84	\$ 150.82	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Vision (VSP)	Self Insured				
Employee Only		457	\$ 86.16	\$ 7.18	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + 1		244	\$ 172.44	\$ 14.37	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost
Employee + Family		651	\$ 224.04	\$ 18.67	if medical elected - bundled in city contribution in medical rate above; if no medical elected - city covers full cost