2016-2017 School Year

Gilroy Federation of Paraeducators

Coverage: 6 hours to under 7 hours

CalPERS Health Premium Rates, 8 hours

Effective: January 1, 2017

	CalPERS	CalPERS				
	Monthly	Yearly	Yearly District	Employee	Monthly	Monthly Deduction
Health Plans	Premium	Premium	Contribution	Yearly Cost	Deduction (10 Months)	(9 months) September - May
Anthem HMO Select						
Single	\$783.46	\$9,401.52	\$6,303.27	\$3,098.25	\$309.83	\$344.25
Two-Party	\$1,566.92	\$18,803.04	\$12,606.54	\$6,196.50	\$619.65	\$688.50
Family	\$2,037.00	\$24,444.00	\$16,388.48	\$8,055.52	\$805.55	\$895.06
Anthem HMO Traditional						
Single	\$990.05	\$11,880.60	\$6,303.27	\$5,577.33	\$557.73	\$619.70
Two-Party	\$1,980.10	\$23,761.20	\$12,606.54	\$11,154.66	\$1,115.47	\$1,239.41
Family	\$2,574.13	\$30,889.56	\$16,388.48	\$14,501.08	\$1,450.11	\$1,611.23
BSC Access+						
Single	\$1,024.85	\$12,298.20	\$6,303.27	\$5,994.93	\$599.49	\$666.10
Two-Party	\$2,049.70	\$24,596.40	\$12,606.54	\$11,989.86	\$1,198.99	\$1,332.21
Family	\$2,664.61	\$31,975.32	\$16,388.48	\$15,586.84	\$1,558.68	\$1,731.87
HealthNet SmartCare						
Single	\$733.29	\$8,799.48	\$6,303.27	\$2,496.21	\$249.62	\$277.36
Two-Party	\$1,466.58	\$17,598.96	\$12,606.54	\$4,992.42	\$499.24	\$554.71
Family	\$1,906.55	\$22,878.60	\$16,388.48	\$6,490.12	\$649.01	\$721.12
Kaiser Permanente						
Single	\$733.39	\$8,800.68	\$6,303.27	\$2,497.41	\$249.74	\$277.49
Two-Party	\$1,466.78	\$17,601.36	\$12,606.54	\$4,994.82	\$499.48	\$554.98
Family	\$1,906.81	\$22,881.72	\$16,388.48	\$6,493.24	\$649.32	\$721.47
PERS Choice						
Single	\$830.30	\$9,963.60	\$6,303.27	\$3,660.33	\$366.03	\$406.70
Two-Party	\$1,660.60	\$19,927.20	\$12,606.54	\$7,320.66	\$732.07	\$813.41
Family	\$2,158.78	\$25,905.36	\$16,388.48	\$9,516.88	\$951.69	\$1,057.43
PERS Select						
Single	\$736.27	\$8,835.24	\$6,303.27	\$2,531.97	\$253.20	\$281.33
Two-Party	\$1,472.54	\$17,670.48	\$12,606.54	\$5,063.94	\$506.39	\$562.66
Family	\$1,914.30	\$22,971.60	\$16,388.48	\$6,583.12	\$658.31	\$731.46
PERSCare PERSCare						
Single	\$932.39	\$11,188.68	\$6,303.27	\$4,885.41	\$488.54	\$542.82
Two-Party	\$1,864.78	\$22,377.36	\$12,606.54	\$9,770.82	\$977.08	\$1,085.65
Family	\$2,424.21	\$29,090.52	\$16,388.48	\$12,702.04	\$1,270.20	\$1,411.34
PORAC (Police)						
Single	\$699.00	\$8,388.00	\$6,303.27	\$2,084.73	\$208.47	\$231.64
Two-Party	\$1,467.00	\$17,604.00	\$12,606.54	\$4,997.46	\$499.75	\$555.27
Family	\$1,876.00	\$22,512.00	\$16,388.48	\$6,123.52	\$612.35	\$680.39
<u>UnitedHealthCare</u>						
Single	\$1,062.26	\$12,747.12	\$6,303.27	\$6,443.85	\$644.39	\$715.98
Two-Party	\$2,124.52	\$25,494.24	\$12,606.54	\$12,887.70	\$1,288.77	\$1,431.97
Family	\$2,761.88	\$33,142.56	\$16,388.48	\$16,754.08	\$1,675.41	\$1,861.56