



# 2020 Health Insurance Rates

## Region 3

Los Angeles, Riverside San Bernardino

<b>FIREFIGHTER AND FIRE MANAGEMENT UNITS</b>				
	Monthly Premium	City's Monthly Contribution	Employee's Monthly Contribution	Employee's Pay Period Contribution
<b>ANTHEM HMO SELECT</b>				
▪ Single	\$619.93	\$619.93	\$0.00	\$0.00
▪ Two Party	\$1,239.86	\$1,209.30	\$30.56	\$15.28
▪ Family	\$1,611.82	\$1,583.30	\$28.52	\$14.26
<b>ANTHEM HMO TRADITIONAL</b>				
▪ Single	\$902.63	\$625.11	\$277.52	\$138.76
▪ Two Party	\$1,805.26	\$1,209.30	\$595.96	\$297.98
▪ Family	\$2,346.84	\$1,583.30	\$763.54	\$381.77
<b>BLUE SHIELD ACCESS +</b>				
▪ Single	\$813.17	\$625.11	\$188.06	\$94.03
▪ Two Party	\$1,626.34	\$1,209.30	\$417.04	\$208.52
▪ Family	\$2,114.24	\$1,583.30	\$530.94	\$265.47
<b>BLUE SHIELD TRIO</b>				
▪ Single	\$624.93	\$624.93	\$0.00	\$0.00
▪ Two Party	\$1,249.86	\$1,209.30	\$40.56	\$20.28
▪ Family	\$1,624.82	\$1,583.30	\$41.52	\$20.76
<b>HEALTH NET SALUD Y MAS</b>				
▪ Single	\$392.31	\$392.31	\$0.00	\$0.00
▪ Two Party	\$784.62	\$784.62	\$0.00	\$0.00
▪ Family	\$1,020.01	\$1,020.01	\$0.00	\$0.00
<b>HEALTH NET SMARTCARE</b>				
▪ Single	\$648.42	\$625.11	\$23.31	\$11.66
▪ Two Party	\$1,296.84	\$1,209.30	\$87.54	\$43.77
▪ Family	\$1,685.89	\$1,583.31	\$102.58	\$51.29

**CITY CONTRIBUTIONS SHOWN BASED ON 40% (CITY) AND 60% (FIRE) PORAC PREMIUM DECREASE.  
FINAL CONTRIBUTIONS SUBJECT TO NEGOTIATIONS WITH FIRE ASSOCIATIONS AND  
APPROVED BY CITY COUNCIL.**



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	Monthly Premium	City's Monthly Contribution	Employee's Monthly Contribution	Employee's Pay Period Contribution
<b>KAISER PERMANENTE</b>				
▪ Single	\$664.39	\$625.11	\$39.28	\$19.64
▪ Two Party	\$1,328.78	\$1,209.30	\$119.48	\$59.74
▪ Family	\$1,727.41	\$1,583.31	\$144.10	\$72.05
<b>PERS CHOICE</b>				
▪ Single	\$710.29	\$625.11	\$85.18	\$42.59
▪ Two Party	\$1,420.58	\$1,209.30	\$211.28	\$105.64
▪ Family	\$1,846.75	\$1,583.31	\$263.44	\$131.72
<b>PERS SELECT</b>				
▪ Single	\$435.74	\$435.74	\$0.00	\$0.00
▪ Two Party	\$871.48	\$871.48	\$0.00	\$0.00
▪ Family	\$1,132.92	\$1,132.92	\$0.00	\$0.00
<b>PERS CARE</b>				
▪ Single	\$931.12	\$625.10	\$306.02	\$153.01
▪ Two Party	\$1,862.24	\$1,209.30	\$652.94	\$326.47
▪ Family	\$2,420.91	\$1,583.31	\$837.60	\$418.80
<b>PORAC</b>				
▪ Single	\$699.00	\$625.10	\$73.90	\$36.95
▪ Two Party	\$1,399.00	\$1,209.30	\$189.70	\$94.85
▪ Family	\$1,894.00	\$1,583.30	\$310.70	\$155.35
<b>UNITED HEALTHCARE</b>				
▪ Single	\$668.31	\$625.11	\$43.20	\$21.60
▪ Two Party	\$1,336.62	\$1,209.30	\$127.32	\$63.66
▪ Family	\$1,737.61	\$1,583.31	\$154.30	\$77.15

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