



# 2021 Health Insurance Rates

EXECUTIVE UNIT				
	Monthly Premium	City's Monthly Contribution	Employee's Monthly Contribution	Employee's Pay Period Contribution
<b>CIGNA OPEN ACCESS PLUS CHOICE FUND HSA PPO PLAN</b>				
▪ Single	\$1,118.62	\$500.00	\$618.62	\$309.31
▪ Two Party	\$2,350.35	\$1,000.01	\$1,350.34	\$675.17
▪ Family	\$3,359.24	\$1,350.00	\$2,009.24	\$1,004.62
<b>CIGNA FULL NETWORK HMO PLAN</b>				
▪ Single	\$871.87	\$500.01	\$371.86	\$185.93
▪ Two Party	\$1,830.93	\$1,000.01	\$830.92	\$415.46
▪ Family	\$2,615.62	\$1,350.00	\$1,265.62	\$632.81
<b>CIGNA SELECT NETWORK HMO PLAN</b>				
▪ Single	\$705.63	\$500.01	\$205.62	\$102.81
▪ Two Party	\$1,481.84	\$1,000.00	\$481.84	\$240.92
▪ Family	\$2,116.90	\$1,350.00	\$766.90	\$383.45
<b>KAISER HMO</b>				
▪ Single	\$666.08	\$500.00	\$166.08	\$83.04
▪ Two Party	\$1,332.15	\$1,000.01	\$332.14	\$166.07
▪ Family	\$1,885.00	\$1,350.00	\$535.00	\$267.50
<b>DELTA DENTAL PPO</b>				
▪ Single	\$55.49	\$48.19	\$7.30	\$3.65
▪ Two Party	\$110.99	\$48.19	\$62.80	\$31.40
▪ Family	\$138.74	\$48.20	\$90.54	\$45.27
<b>DELTA DENTAL HMO</b>				
▪ Single	\$16.34	\$16.34	\$0.00	\$0.00
▪ Two Party	\$32.66	\$32.66	\$0.00	\$0.00
▪ Family	\$48.19	\$48.19	\$0.00	\$0.00
<b>VSP</b>				
▪ Single	\$9.31	\$9.31	\$0.00	\$0.00
▪ Two Party	\$13.44	\$13.44	\$0.00	\$0.00
▪ Family	\$24.14	\$24.14	\$0.00	\$0.00