

**PUHSD 2017-2018
ESTIMATED INSURANCE RATES
Standard Retiree (Age 65+)**

Anthem Blue Cross/United Healthcare HMO w/Medicare

HMO20	\$20 DOV \$5/\$25/\$40 RX Monthly
Single	\$613.57
2~Party (Both w/Medicare)	\$1,227.14
2-Party (One with and one w/o)	\$1,373.74
HMO30	\$30 DOV \$10/\$30/\$60 RX Monthly
Single	\$572.88
2~Party	\$1,145.76
2-Party (One with and one w/o)	\$1,282.73
HMO40	\$40 DOV / \$250 Admission Co-Pay \$500/1000 Deductible \$10/\$30/\$60 RX Monthly
Single	\$519.22
2~Party	\$1,038.44
2-Party (One with and one w/o)	\$1,162.61

Anthem Blue Cross H.S.A.

PLAN 1	\$1500/\$3000 90%/70% \$10/\$30 RX Monthly
Single	\$622.34
2~Party	\$1,244.68
2-Party (One with and one w/o)	\$1399.06

Kaiser Senior Advantage Both Members with Medicare

	\$20 DOV \$10 RX Monthly
Single	\$196.40
2~Party	\$392.80

Kaiser Senior Advantage One w/ Medicare One w/o Medicare

	\$20 DOV \$10 RX Monthly
2~Party Employee with; Spouse w/o	\$806.35
2~Party Employee w/o; Spouse with	\$806.32

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ESTIMATED INSURANCE RATES
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Anthem Blue Cross PPO - In State

PPO500	\$500/\$1500 90%/70% \$10/\$30/\$10 + Cost RX Monthly
Single	\$1,113.63
2~Party	\$2,227.26
2-Party (One with and one w/o)	\$2,501.99
Out of State - Single	\$1,149.21
PPO750	\$750/\$2250 80%/60% \$10/\$50/\$15 + Cost RX Monthly
Single	\$1003.17
2~Party	\$2,006.34
2-Party (One with and one w/o)	\$2,253.77

Dental

	Monthly
PPO-Incentive	S-\$63.77; 2-pty-\$127.55; F-\$188.14
PPO	S-\$52.43; 2-pty-\$104.85; F-\$154.65
Anthem Dental - Certificated	S-\$44.53; 2-pty-\$89.06; F-\$131.37
Anthem Dental - Mgmt/Conf/Class	S-\$45.26; 2-pty-\$90.52; F-\$133.52
DeltaCare PMI - Classified	S; 2-Pty; F - \$53.15

Vision

	Monthly
VSP - Cert/Mgmt/Conf	S-\$7.13; 2-Pty-\$14.27; F-\$21.04
VSP - Classified	S-\$15.25; 2-Pty-\$30.50; F-\$44.99
MES - Cert/Mgmt/Conf	S-\$4.90; 2-Pty \$9.80; F-\$14.46
MES - Classified	S-\$5.27.; 2-Pty-\$10.55; F-\$15.56