

		Monthly Premium Rate	2018 Monthly Out of Pocket	COBRA Rate (+ 2% Fee)
<b>MEDICAL</b>				
<b><u>FIRE, MID-CON, MEA, POLICE, PROTECH, UNREP</u></b>				
<b>Anthem Blue Cross</b>				
<b>Select HMO</b>	Single	\$856.41	\$76.55	\$873.54
	Single +1	\$1,712.82	\$153.10	\$1,747.08
	Family	\$2,226.67	\$199.03	\$2,271.20
<b>Anthem Blue Cross</b>				
<b>Traditional HMO</b>	Single	\$925.47	\$145.61	\$943.98
	Single +1	\$1,850.94	\$291.22	\$1,887.96
	Family	\$2,406.22	\$378.58	\$2,454.34
<b>Blue Shield Access+</b>				
	Single	\$889.02	\$109.16	\$906.80
	Single +1	\$1,778.04	\$218.32	\$1,813.60
	Family	\$2,311.45	\$283.81	\$2,357.68
<b>HealthNet SmartCare</b>				
	Single	\$863.48	\$83.62	\$880.75
	Single +1	\$1,726.96	\$167.24	\$1,761.50
	Family	\$2,245.05	\$217.41	\$2,289.95
<b>Kaiser</b>				
	Single	\$779.86	\$0.00	\$795.46
	Single +1	\$1,559.72	\$0.00	\$1,590.91
	Family	\$2,027.64	\$0.00	\$2,068.19
<b>PERS Care</b>				
	Single	\$882.45	\$102.59	\$900.10
	Single +1	\$1,764.90	\$205.18	\$1,800.20
	Family	\$2,294.37	\$266.73	\$2,340.26
<b>PERS Choice</b>				
	Single	\$800.27	\$20.41	\$816.28
	Single & 1	\$1,600.54	\$40.82	\$1,632.55
	Family	\$2,080.70	\$53.06	\$2,122.31
<b>PERS Select</b>				
	Single	\$717.50	\$0.00	\$731.85
	Single & 1	\$1,435.00	\$0.00	\$1,463.70
	Family	\$1,865.50	\$0.00	\$1,902.81
<b>PORAC</b>				
	Single	\$734.00	\$0.00	\$748.68
	Single & 1	\$1,540.00	\$0.00	\$1,570.80
	Family	\$1,970.00	\$0.00	\$2,009.40
<b>United Healthcare</b>				
<b>Alliance HMO</b>	Single	\$1,371.84	\$591.98	\$1,399.28
	Single & 1	\$2,743.68	\$1,183.96	\$2,798.55
	Family	\$3,566.78	\$1,539.14	\$3,638.12
<b>Western Health</b>				
<b>Advantage</b>	Single	\$792.56	\$12.70	\$808.41
	Single & 1	\$1,585.12	\$25.40	\$1,616.82
	Family	\$2,060.66	\$33.02	\$2,101.87
<b>VISION</b>				
<b><u>FIRE, MID-CON, MEA, POLICE, PROTECH, UNREP</u></b>				
	Single	\$6.66	\$0.00	\$6.79
	2 Party	\$13.23	\$0.00	\$13.49
	Family	\$17.05	\$0.00	\$17.39
<b>DENTAL</b>				
<b><u>IAFF, MID-CON, MEA, PROTECH, &amp; UNREP</u></b>				
		\$220.17	\$0.00	\$224.57
<b><u>POLICE</u></b>				
	Single	\$91.79	\$0.00	\$93.63
	Family	\$221.22	\$0.00	\$225.64
<b>DISABILITY</b>				
<b><u>Short Term</u></b>				
<b><u>MID-CON, MEA, MSA, PROTECH, &amp; UNREP</u></b>				
		\$6.80	\$0.00	
<b><u>Long Term</u></b>				
<b><u>MID-CON, MEA, MSA, PROTECH, &amp; UNREP</u></b>				
	\$1,500. (60% Ben.)	\$7.13	\$0.00	
<b><u>FIRE</u></b>				
		\$24.50	\$0.00	
<b><u>POLICE</u></b>				
	Non-Sworn \$1,500. (60% Ben.)	\$7.13	\$0.00	
	Sworn	\$19.50	\$0.00	
<b>LIFE INSURANCE</b>				
<b><u>ALL EMPLOYEES</u></b>				
	\$50,000 Coverage	\$7.00	\$0.00	
<b>DEFERRED COMPENSATION</b>				
<b><u>PROTECH, MID-CON, &amp; UNREP</u></b>				
		\$75.00		
<b><u>FIRE</u></b>				
		\$50.00		