

City of Modesto
UNDER 65 RETIREE RATES
2011 Plan Year
Rates effective 1/1/2011 - 12/31/2011

In-Area	Kaiser HMO	Kaiser HDHP	Anthem Blue Cross HMO	Anthem Blue Cross PPO	Anthem Blue Cross HDHP
Single	589.44	390.13	865.15	1309.47	475.55
Two-Party	1178.88	780.26	1762.82	2670.66	969.01
Family	1668.30	1104.08	2449.17	3710.30	1346.14

Out-of-State

Single	N/A	N/A	N/A	1306.81	475.55
Two-Party	N/A	N/A	N/A	2665.34	969.01
Family	N/A	N/A	N/A	3702.59	1346.14

	<u>Dental</u>	<u>Vision</u>
Single	44.04	12.52
Two-Party	120.36	28.96
Family	120.36	28.96

Included in Above Health Rates:

(Chiropractic service through American Specialty is excluded from the HDHP)

In-Area	<u>Chiropractic</u>
Single	2.66
Two-Party	5.32
Family	7.71

Out-of-Area	<u>Chiropractic</u>
Single	N/A
Two-Party	N/A
Family	N/A

Calculating Your Insurance Premium:

Health Premium:	\$
(add) +	
Dental Premium:	\$
(add) +	
Vision Premium:	\$
Total Premium: =	\$
(minus) -	
City contribution (if applicable)	\$
=	
Monthly Cost:	\$

City Contribution:

	<u>MPMA Single</u>	MCEA UNREP MCMA MPNSA MPOA <u>Single</u>	MCEA UNREP MCMA MPNSA MPOA <u>Family</u>	<u>MPMA Family</u>
Health Up to	546.95	569.90	1005.87	960.15
Dental	38.19	39.79	75.87	72.43
Vision	10.86	11.31	18.26	17.42
	<u>\$596.00</u>	<u>\$621.00</u>	<u>\$1,100.00</u>	<u>\$1,050.00</u>

City of Modesto
65 AND OVER RETIREE RATES
2011 Plan Year
Rates effective 1/1/2011 - 12/31/2011

M = Medicare Eligible

NM = Non-medicare (under age 65)

Kaiser Senior Advantage - Single (M)	\$247.26
Kaiser Senior Advantage - Retiree (M), Spouse (M)	\$494.52
Kaiser Senior Advantage - 1 (M), Kaiser HMO 1 (NM)	\$836.70
Kaiser Senior Advantage - 1 (M), Kaiser HDHP 1 (NM)	\$637.39
Kaiser Senior Advantage - 1 (M), Anthem Blue Cross HMO 1 (NM)	\$1,112.41
Kaiser Senior Advantage - 1 (M), Anthem Blue Cross PPO 1 (NM)	\$1,556.73
Kaiser Senior Advantage - 1 (M), Anthem Blue Cross HDHP 1 (NM)	\$722.81
PacifiCare Secure Horizons - Single (M)	\$341.03
PacifiCare Secure Horizons - Retiree (M), Spouse (M)	\$682.06
PacifiCare Secure Horizons - 1 (M), Kaiser HMO 1 (NM)	\$930.47
PacifiCare Secure Horizons - 1 (M), Kaiser HDHP 1 (NM)	\$731.16
PacifiCare Secure Horizons - 1 (M), Anthem Blue Cross HMO 1 (NM)	\$1,206.18
PacifiCare Secure Horizons - 1 (M), Anthem Blue Cross PPO 1 (NM)	\$1,650.50
PacifiCare Secure Horizons - 1 (M), Anthem Blue Cross HDHP 1 (NM)	\$816.58
PacifiCare Supplemental - Single (M)	\$399.73
PacifiCare Supplemental - Retiree (M), Spouse (M)	\$799.46
PacifiCare Supplemental - 1 (M), Kaiser HMO 1 (NM)	\$989.17
PacifiCare Supplemental - 1 (M), Kaiser HDHP 1 (NM)	\$789.86
PacifiCare Supplemental - 1 (M), Anthem Blue Cross HMO 1 (NM)	\$1,264.88
PacifiCare Supplemental - 1 (M), Anthem Blue Cross PPO 1 (NM)	\$1,709.20
PacifiCare Supplemental - 1 (M), Anthem Blue Cross HDHP 1 (NM)	\$875.28

	<u>Dental</u>		<u>Vision</u>
Single	44.04		12.52
Two-Party	120.36		28.96

City Contribution:

	MCEA UNREP MCMA MPNSA MPOA <u>Single</u>	MPMA <u>Single</u>	MCEA UNREP MCMA MPNSA MPOA <u>Family</u>	MPMA <u>Family</u>
Health Up to	569.90	546.95	1005.87	960.15
Dental	39.79	38.19	75.87	72.43
Vision	<u>11.31</u>	<u>10.86</u>	<u>18.26</u>	<u>17.42</u>
	621.00	596.00	1100.00	1050.00

Calculating Your Insurance Premium:

Health Premium:	\$
(add) +	
Dental Premium:	\$
(add) +	
Vision Premium:	\$
Total Premium:	= \$
(minus) -	
City contribution (if applicable)	\$
	=
Monthly Cost:	\$