

MEDICAL PLANS
2011 PREMIUM RATES FOR BAY AREA REGION
Effective: January 1, 2011 - December 31, 2011

Plan Name	Plan Code	Plan Description	Premium Amount /Mo.	AFT, Acad Sups, Administrators		AFSCME, CSEA, Class Prof/Sups, Confidential	
				Portion Paid by District /Mo.	Out of Pocket/Mo.	Portion Paid by District /Mo.	Out of Pocket/Mo.
Blue Shield Access+ HMO	1021	Single	\$ 675.51	\$ 604.00	\$ 71.51	\$ 604.00	\$ 71.51
	1022	2-Party	\$ 1,351.02	\$ 901.34	\$ 449.68	\$ 976.60	\$ 374.42
	1023	Family	\$ 1,756.33	\$ 1,183.74	\$ 572.59	\$ 1,281.58	\$ 474.75
					\$ -		\$ -
Blue Shield NetValue	1241	Single	\$ 581.24	\$ 581.24	\$ -	\$ 581.24	\$ -
(Please contact Blue Shield to make sure you qualify 800-334-5847)	1242	2-party	\$ 1,162.48	\$ 901.34	\$ 261.14	\$ 976.60	\$ 185.88
	1243	Family	\$ 1,511.22	\$ 1,183.74	\$ 327.48	\$ 1,281.58	\$ 229.64
					\$ -		\$ -
Kaiser Permanente HMO	1041	Single	\$ 568.99	\$ 568.99	\$ -	\$ 568.99	\$ -
	1042	2-Party	\$ 1,137.98	\$ 901.34	\$ 236.64	\$ 976.60	\$ 161.38
	1043	Family	\$ 1,479.37	\$ 1,183.74	\$ 295.63	\$ 1,281.58	\$ 197.79
					\$ -		\$ -
Anthem Blue Cross PPO	1061	Single	\$ 563.40	\$ 563.40	\$ -	\$ 563.40	\$ -
(PERS Choice)	1062	2-Party	\$ 1,126.80	\$ 901.34	\$ 225.46	\$ 976.60	\$ 150.20
80/20 PLAN	1063	Family	\$ 1,464.84	\$ 1,183.74	\$ 281.10	\$ 1,281.58	\$ 183.26
					\$ -		\$ -
Anthem Blue Cross PPO	1261	Single	\$ 492.68	\$ 492.68	\$ -	\$ 492.68	\$ -
(PERS SELECT)	1262	2-Party	\$ 985.36	\$ 901.34	\$ 84.02	\$ 976.60	\$ 8.76
80/20 Plan - Reduced Network	1263	Family	\$ 1,280.97	\$ 1,183.74	\$ 97.23	\$ 1,280.97	\$ -
					\$ -		\$ -
Anthem Blue Cross PPO	1221	Single	\$ 893.95	\$ 604.00	\$ 289.95	\$ 604.00	\$ 289.95
(PERS CARE)	1222	2-Party	\$ 1,787.90	\$ 901.34	\$ 886.56	\$ 976.60	\$ 811.30
90/10 Plan	1223	Family	\$ 2,324.27	\$ 1,183.74	\$ 1,140.53	\$ 1,281.58	\$ 1,042.69