

## MEDICAL - 2017

## **Monthly Premium Rates**

	PPO \$20	PPO \$25	PPO \$30	PPO \$35	PPO \$40	PPO \$50	PPO \$60	EPO	KAISER PERMANENTE*		
ACTIVE EMPLOYEES								Southern	Low	Mid	High
(includes life insurance)								California	Plan	Plan	Plan
Employee Only	\$1,038.00	\$749.00	\$711.00	\$693.00	\$674.00	\$632.00	\$568.00	\$499.00	\$ 503.00	\$ 539.00	\$ 646.00
Employee + 1	\$2,073.00	\$1,494.00	\$1,419.00	\$1,382.00	\$1,345.00	\$1,262.00	\$1,132.00	\$995.00	\$ 1,005.00	\$ 1,078.00	\$ 1,292.00
Family	\$2,694.00	\$1,941.00	\$1,844.00	\$1,795.00	\$1,747.00	\$1,639.00	\$1,471.00	\$1,293.00	\$ 1,422.00	\$ 1,525.00	\$ 1,828.00
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	PPO \$20	PPO \$25	PPO \$30	PPO \$35	PPO \$40	PPO \$50	PPO \$60	EPO	KAISER PERMANENTE RETIREE*		
EARLY RETIREES								Southern	Low	Mid	High
								California	Plan	Plan	Plan
Employee Only	\$1,035.00	\$746.00	\$708.00	\$689.00	\$671.00	\$629.00	\$564.00	\$496.00	\$ 689.00	\$ 748.00	\$ 843.00
Employee + 1	\$2,070.00	\$1,491.00	\$1,416.00	\$1,379.00	\$1,341.00	\$1,258.00	\$1,129.00	\$992.00	\$ 1,377.00	\$ 1,495.00	\$ 1,685.00
Family	\$2,691.00	\$1,938.00	\$1,841.00	\$1,792.00	\$1,744.00	\$1,636.00	\$1,468.00	\$1,290.00	\$ 1,948.00	\$ 2,116.00	\$ 2,384.00

Effective January 1, 2017 through December 31, 2017.

<sup>\*</sup>Kaiser fully insured program does not include life insurance, MCSIG wellness program and ancillary benefits