

**PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT**

**GROUP MEDICAL INSURANCE RATES 2018**

**CERTIFICATED 11 MONTH**

**MEDICAL, DENTAL AND VSP (JANUARY 1, 2018 - DECEMBER 31, 2018) LIFE (OCTOBER 1, 2018 - DECEMBER 31, 2019)**

	EMPLOYEE ONLY			EMPLOYEE + 1 DEPENDENT			EMPLOYEE + 2 OR MORE			TWO "E" COUPLES		
	Employee	District	Total	Employee	District	Total	Employee	District	Total	Employee	District	Total
ANTHEM SELECT HMO	<b>240.46</b>	479.73	720.19	<b>799.55</b>	640.82	1440.37	<b>1146.67</b>	725.81	1872.48	<b>420.86</b>	1451.62	1872.48
ANTHEM TRADITIONAL HMO	<b>376.33</b>	479.73	856.06	<b>1071.30</b>	640.82	1712.12	<b>1499.94</b>	725.81	2225.75	<b>774.13</b>	1451.62	2225.75
BLUE SHIELD ACCESS + HMO	<b>189.31</b>	479.73	669.04	<b>697.27</b>	640.82	1338.09	<b>1013.70</b>	725.81	1739.51	<b>287.89</b>	1451.62	1739.51
HEALTH NET SALUD Y MAS HMO	<b>0.00</b>	441.08	441.08	<b>241.33</b>	640.82	882.15	<b>420.99</b>	725.81	1146.80	<b>0.00</b>	1146.80	1146.80
HEALTH NET SMARTCARE HMO	<b>149.89</b>	479.73	629.62	<b>618.42</b>	640.82	1259.24	<b>911.20</b>	725.81	1637.01	<b>185.39</b>	1451.62	1637.01
KAISER HMO	<b>221.40</b>	479.73	701.13	<b>761.43</b>	640.82	1402.25	<b>1097.12</b>	725.81	1822.93	<b>371.31</b>	1451.62	1822.93
PERS CHOICE PPO	<b>197.06</b>	479.73	676.79	<b>712.76</b>	640.82	1353.58	<b>1033.84</b>	725.81	1759.65	<b>308.03</b>	1451.62	1759.65
PERS SELECT PPO	<b>145.59</b>	479.73	625.32	<b>609.82</b>	640.82	1250.64	<b>900.03</b>	725.81	1625.84	<b>174.22</b>	1451.62	1625.84
PERS CARE PPO	<b>255.25</b>	479.73	734.98	<b>829.14</b>	640.82	1469.96	<b>1185.14</b>	725.81	1910.95	<b>459.33</b>	1451.62	1910.95
UNITED HEALTHCARE HMO	<b>177.85</b>	479.73	657.58	<b>674.34</b>	640.82	1315.16	<b>983.90</b>	725.81	1709.71	<b>258.09</b>	1451.62	1709.71
DELTA DENTAL	<b>0.00</b>	62.94	62.94	<b>60.07</b>	62.94	123.01	<b>94.31</b>	75.39	169.70	<b>18.92</b>	150.78	169.70
VSP-VISION SERVICE PLAN	<b>0.00</b>	10.51	10.51	<b>10.07</b>	10.51	20.58	<b>17.85</b>	10.51	28.36	<b>7.34</b>	21.02	28.36
MUTUAL OF OMAHA	<b>0.00</b>	7.20	7.20	<b>0.00</b>	7.96	7.96	<b>0.00</b>	7.96	7.96	<b>0.00</b>	7.96	7.96

**RATES FOR MEDICAL PLANS ARE FOR LOS ANGELES, SAN BERNARDINO & VENTURA AREAS ONLY.  
IF YOU RESIDE IN OTHER SOUTHERN CALIFORNIA AREAS I.E. ORANGE, RIVERSIDE, YOUR RATES  
WILL BE DIFFERENT.**