

**CITY OF SUNNYVALE  
2012 HEALTH PREMIUM RATES  
---MONTHLY---**

Effective

January 1, 2012

Updated: 06/23/11

**MEDICAL RATES – CalPERS Bay Area Region**

	<i>Rates Effective</i>	<i>01/01/12</i>	<i>through</i>	<i>12/31/12</i>			
Medical Plan		EO	Plan Code	EE +1	Plan Code	EE +2+ (Family)	Plan Code
Blue Shield Access+ HMO		\$711.10	1021	\$1,422.20	1022	\$1,848.86	1023
Blue Shield Net Value HMO		\$611.59	1241	\$1,223.18	1242	\$1,590.13	1243
Kaiser CA HMO		\$610.44	1041	\$1,220.88	1042	\$1,587.14	1043
PERS Choice PPO		\$574.15	1061	\$1,148.30	1062	\$1,492.79	1063
PERS Select PPO		\$487.39	1261	\$974.78	1262	\$1,267.21	1263
PERS Care PPO		\$1,029.23	1221	\$2,058.46	1222	\$2,676.00	1223
PORAC PPO		\$556.00	2071	\$1,041.00	2072	\$1,323.00	2073

**DENTAL PLANS**

	<i>Rates Effective</i>	<i>01/01/12</i>	<i>through</i>	<i>12/31/12</i>
PPO DENTAL RATES		EO	EE +1	EE +2+ (Family)
Delta Preferred PPO		\$47.98	\$90.67	\$148.90
Delta Preferred PPO - SEIU		\$39.86	\$75.20	\$123.49

**PPO DENTAL BUY-UP OPTION - Employee Paid**

*Employee Pays the Difference between Core Coverage and Buy-Up Option Coverage*

		EO	EE +1	EE +2+ (Family)
Delta Preferred PPO		\$67.79	\$126.51	\$198.78
	<i>Difference</i>	\$19.81	\$35.84	\$49.88
Delta Preferred PPO - SEIU		\$55.29	\$102.86	\$162.54
	<i>Difference</i>	\$15.43	\$27.66	\$39.05

DMO DENTAL RATES		EO	EE +1	EE +2+ (Family)
Delta Care DMO		\$18.31	\$32.95	\$48.76

**PSOA/COA DENTAL RATES**

\$140.55 per month per employee

This amount represents the maximum City paid pursuant to the current\* PSOA/COA MOU

\*PSOA-2006/2015 COA-2007/2012

**VISION RATES**

	<i>Rates Effective</i>	<i>01/01/11</i>	<i>through</i>	<i>12/31/12</i>
		EO	EE +1	EE +2+ (Family)
Vision Service Plan (VSP)		\$7.33	\$11.38	\$16.92
				SEA/SEIU
				\$5.54

difference between EE +1 and Family

**VISION BUY-UP OPTION - Employee Paid**

*Employee Pays the Difference between Core Coverage and Buy-Up Option Coverage*

		EO	EE +1	EE +2+ (Family)
Vision Service Plan (VSP)		\$9.25	\$14.42	\$21.51
	<i>Difference</i>	\$1.92	\$3.04	\$4.59

**Life/AD&D INSURANCE**

*Rates Effective* 07/01/09 *through* 06/30/12

Per \$1,000 of coverage (base salary rounded up to nearest \$1,000)

ING/ReliaStar Basic Coverage	Basic Life \$0.117	AD&D \$0.02
ING/ReliaStar Supplemental Coverage	Life \$0.20	AD&D \$0.02

Employees Assistance Plan (EAP) \$5.84 per month per employee.

*Rate Effective* 07/01/09 *through* 06/30/12

**Long-Term Disability Insurance (LTD)**

\$0.561 per \$100 of coverage up to \$16,418 per month (maximum benefit 67% or \$11,000 per month\*)

\* All employees except City Attorney/City Manager

*Rates Effective* 07/01/09 *through* 06/30/12

Note: for PSOA-represented employees, LTD coverage is provided through the Association