

**Foothill – De Anza Community College District
Full-Pay Retiree and Surviving Spouse Rates**

PERSCare PPO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$932.39	\$92.66	\$1,025.05
2 Party	\$1,864.78	\$185.32	\$2,050.10
Family	\$2,424.21	\$264.64	\$2,688.85
PERS Choice PPO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$830.30	\$92.66	\$922.96
2 Party	\$1,660.60	\$185.32	\$1,845.92
Family	\$2,158.78	\$264.64	\$2,423.42
PERS Select PPO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$736.27	\$92.66	\$828.93
2 Party	\$1,472.54	\$185.32	\$1,657.86
Family	\$1,914.30	\$264.64	\$2,178.94
UnitedHealthCare Group Medicare Advantage PPO Plan (Available in all 50 States)	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$324.21	\$92.66	\$416.87
2 Party	\$648.42	\$185.32	\$833.74
Family	\$972.63	\$264.64	\$1,237.27
Anthem Select HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$783.46	\$92.66	\$876.12
2 Party	\$1,566.92	\$185.32	\$1,752.24
Family	\$2,037.00	\$264.64	\$2,301.64
Anthem Traditional HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$990.05	\$92.66	\$1,082.71
2 Party	\$1,980.10	\$185.32	\$2,165.42
Family	\$2,574.13	\$264.64	\$2,838.77
Blue Shield Access+ HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,024.85	\$92.66	\$1,117.51
2 Party	\$2,049.70	\$185.32	\$2,235.02
Family	\$2,664.61	\$264.64	\$2,929.25

NOTE: Medical monthly premium is collected by CalPERS. Dental & Vision quarterly premium are offset against your EFT account set up through SECOVA on behalf of FHDA

** Other Southern California

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HealthNet SmartCare HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$733.29	\$92.66	\$825.95
2 Party	\$1,466.58	\$185.32	\$1,651.90
Family	\$1,906.55	\$264.64	\$2,171.19
KAISER HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$733.39	\$92.66	\$826.05
2 Party	\$1,466.78	\$185.32	\$1,652.10
Family	\$1,906.81	\$264.64	\$2,171.45
UnitedHealthCare HMO (Bay Area)	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,062.26	\$92.66	\$1,154.92
2 Party	\$2,124.52	\$185.32	\$2,309.84
Family	\$2,761.88	\$264.64	\$3,026.52
**HealthNet Salud HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$473.46	\$92.66	\$566.12
2 Party	\$946.92	\$185.32	\$1,132.24
Family	\$1,231.00	\$264.64	\$1,495.64
**HealthNet SmartCare HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$537.20	\$92.66	\$629.86
2 Party	\$1,074.40	\$185.32	\$1,259.72
Family	\$1,396.72	\$264.64	\$1,661.36
**Sharp HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$614.46	\$92.66	\$707.12
2 Party	\$1,228.92	\$185.32	\$1,414.24
Family	\$1,597.60	\$264.64	\$1,862.24
**UnitedHealthCare HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$549.76	\$92.66	\$581.97
2 Party	\$1,099.52	\$185.32	\$1,163.93
Family	\$1,429.38	\$264.64	\$1,694.02

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