

**Foothill – De Anza Community College District
Full-Pay Retiree and Surviving Spouse Rates 2018**

PERSCare PPO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$882.45	\$74.26	\$956.71
2 Party	\$1,764.90	\$148.52	\$1,913.42
Family	\$2,294.37	\$207.93	\$2,502.30
PERSCare PPO (Medicare)	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$382.30	\$74.26	\$456.56
2 Party	\$764.60	\$148.52	\$913.12
Family	\$1,146.90	\$207.93	\$1,354.83
PERS Choice PPO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$800.27	\$74.26	\$874.53
2 Party	\$1,600.54	\$148.52	\$1,749.06
Family	\$2,080.70	\$207.93	\$2,288.63
PERS Choice PPO (Medicare)	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$345.97	\$74.26	\$420.23
2 Party	\$691.94	\$148.52	\$840.46
Family	\$1,037.91	\$207.93	\$1,245.84
PERS Select PPO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$717.50	\$74.26	\$791.76
2 Party	\$1,435.00	\$148.52	\$1,583.52
Family	\$1,865.50	\$207.93	\$2,073.43
PERS Select PPO (Medicare)	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$345.97	\$74.26	\$420.23
2 Party	\$691.94	\$148.52	\$840.46
Family	\$1,037.91	\$207.93	\$1,245.84
UnitedHealthCare Group Medicare Advantage PPO Plan (Available in all 50 States)	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$330.76	\$74.26	\$405.02
2 Party	\$661.52	\$148.52	\$810.04
Family	\$992.28	\$207.93	\$1,200.21

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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Anthem Select HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$856.41	\$74.26	\$930.67
2 Party	\$1,712.82	\$148.52	\$1,861.34
Family	\$2,226.67	\$207.93	\$2,434.60
Anthem Traditional HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$925.47	\$74.26	\$999.73
2 Party	\$1,850.94	\$148.52	\$1,999.46
Family	\$2,406.22	\$207.93	\$2,614.15
Anthem Medicare Preferred PPO (Available in all 50 States)	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$370.34	\$74.26	\$444.60
2 Party	\$740.68	\$148.52	\$889.20
Family	\$1,,111.02	\$207.93	\$1,318.95
Blue Shield Access+ HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$889.02	\$74.26	\$963.28
2 Party	\$1,778.04	\$148.52	\$1,926.56
Family	\$2,311.45	\$207.93	\$2,519.38
HealthNet SmartCare HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$863.48	\$74.26	\$937.74
2 Party	\$1,726.96	\$148.52	\$1,875.48
Family	\$2,245.05	\$207.93	\$2,452.98
KAISER HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$779.86	\$74.26	\$854.12
2 Party	\$1,559.72	\$148.52	\$1,708.24
Family	\$2,027.64	\$207.93	\$2,235.57
KAISER Sr. Advantage HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$316.34	\$74.26	\$390.60
2 Party	\$632.68	\$148.52	\$781.20
Family	\$949.02	\$207.93	\$1,156.95
UnitedHealthCare HMO (Bay Area)	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,371.84	\$74.26	\$1,446.10
2 Party	\$2,743.68	\$148.52	\$2,892.20
Family	\$3,566.78	\$207.93	\$3,774.71

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**HealthNet Salud HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$461.56	\$74.26	\$535.82
2 Party	\$923.12	\$148.52	\$1,071.64
Family	\$1,200.06	\$207.93	\$1,407.99
**HealthNet SmartCare HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$607.68	\$74.26	\$681.94
2 Party	\$1,215.36	\$148.52	\$1,363.88
Family	\$1,579.97	\$207.93	\$1,787.90
**Sharp HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$618.14	\$74.26	\$692.40
2 Party	\$1,236.28	\$148.52	\$1,384.80
Family	\$1,607.16	\$207.93	\$1,815.09
**UnitedHealthCare HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$616.66	\$74.26	\$690.92
2 Party	\$1,233.32	\$148.52	\$1,381.84
Family	\$1,603.32	\$207.93	\$1,811.25
Western Health Advantage HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$792.56	\$74.26	\$866.82
2 Party	\$1,585.12	\$148.52	\$1,733.64
Family	\$2,060.66	\$207.93	\$2,268.59

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