

## 2022 Part-time Faculty Monthly Contribution Rates

| CalPERS PLANS                   | Per Month<br>Contribution | Per Month<br>Contribution | Per Month<br>Contribution |
|---------------------------------|---------------------------|---------------------------|---------------------------|
|                                 | Load = .400 - .499        | Load = .500 - .599        | Load = .600 - .670        |
| <b>PERS Platinum PPO</b>        |                           |                           |                           |
| Single                          | \$697.04                  | \$611.34                  | \$534.20                  |
| 2 Party                         | \$1,394.09                | \$1,222.68                | \$1,068.41                |
| Family                          | \$1,812.32                | \$1,589.48                | \$1,388.93                |
| <b>PERS Gold PPO</b>            |                           |                           |                           |
| Single                          | \$280.49                  | \$182.32                  | \$84.15                   |
| 2 Party                         | \$560.98                  | \$364.64                  | \$168.30                  |
| Family                          | \$729.28                  | \$474.03                  | \$218.78                  |
| <b>KAISER HMO</b>               |                           |                           |                           |
| Single                          | \$497.09                  | \$411.39                  | \$334.25                  |
| 2 Party                         | \$994.19                  | \$822.78                  | \$668.51                  |
| Family                          | \$1,292.45                | \$1,069.61                | \$869.06                  |
| <b>Anthem Select HMO</b>        |                           |                           |                           |
| Single                          | \$655.84                  | \$570.14                  | \$493.00                  |
| 2 Party                         | \$1,311.69                | \$1,140.28                | \$986.01                  |
| Family                          | \$1,705.20                | \$1,482.36                | \$1,281.81                |
| <b>Anthem Traditional HMO</b>   |                           |                           |                           |
| Single                          | \$944.03                  | \$858.33                  | \$781.19                  |
| 2 Party                         | \$1,888.07                | \$1,716.66                | \$1,562.39                |
| Family                          | \$2,454.49                | \$2,231.65                | \$2,031.10                |
| <b>Blue Shield Access+ HMO</b>  |                           |                           |                           |
| Single                          | \$756.04                  | \$670.34                  | \$593.20                  |
| 2 Party                         | \$1,512.09                | \$1,340.68                | \$1,186.41                |
| Family                          | \$1,965.72                | \$1,742.88                | \$1,542.33                |
| <b>Blue Shield Trio HMO</b>     |                           |                           |                           |
| Single                          | \$538.57                  | \$452.87                  | \$375.73                  |
| 2 Party                         | \$1,077.15                | \$905.74                  | \$751.47                  |
| Family                          | \$1,400.29                | \$1,177.45                | \$976.90                  |
| <b>Health Net SmartCare HMO</b> |                           |                           |                           |
| Single                          | \$793.03                  | \$707.33                  | \$630.19                  |
| 2 Party                         | \$1,586.07                | \$1,414.66                | \$1,260.39                |
| Family                          | \$2,061.89                | \$1,839.05                | \$1,638.50                |

**Medical Only. Does not include Dental or Vision**

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|---------------------------------|---------------------------|---------------------------|---------------------------|
|                                 | Load = .400 - .499        | Load = .500 - .599        | Load = .600 - .670        |
| <b>UnitedHealthcare HMO</b>     |                           |                           |                           |
| Single                          | \$660.31                  | \$574.61                  | \$497.47                  |
| 2 Party                         | \$1,320.63                | \$1,149.22                | \$994.95                  |
| Family                          | \$1,716.82                | \$1,493.98                | \$1,293.43                |
| <b>Western Health Advantage</b> |                           |                           |                           |
| Single                          | \$381.29                  | \$295.59                  | \$218.45                  |
| 2 Party                         | \$762.59                  | \$591.18                  | \$436.91                  |
| Family                          | \$991.37                  | \$768.53                  | \$567.98                  |

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