

**Foothill – De Anza Community College District  
Surviving Spouse Rates 2024**

<b>PERS Platinum PPO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$1,314.27	\$74.46	\$1,388.73
2 Party	\$2,628.54	\$148.93	\$2,777.47
Family	\$3,417.10	\$208.50	\$3,625.60
<b>PERS Platinum Medicare Supplement</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$448.15	\$74.46	\$522.61
2 Party	\$896.30	\$148.93	\$1,045.23
Family	\$1,344.45	\$208.50	\$1,552.95
<b>PERS Gold PPO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$914.82	\$74.46	\$989.28
2 Party	\$1,829.64	\$148.93	\$1,978.57
Family	\$2,378.53	\$208.50	\$2,587.03
<b>PERS Gold Medicare Supplement</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$406.60	\$74.46	\$481.06
2 Party	\$813.20	\$148.93	\$962.13
Family	\$1,219.80	\$208.50	\$1,428.30
<b>Kaiser HMO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$1,021.41	\$74.46	\$1,095.87
2 Party	\$2,042.82	\$148.93	\$2,191.75
Family	\$2,655.67	\$208.50	\$2,864.17
<b>Kaiser Senior Advantage HMO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$324.79	\$74.46	\$399.25
2 Party	\$649.58	\$148.93	\$798.51
Family	\$974.37	\$208.50	\$1,182.87
<b>Kaiser Senior Advantage Out of State HMO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$318.43	\$74.46	\$392.89
2 Party	\$636.86	\$148.93	\$785.79
Family	\$955.29	\$208.50	\$1,163.79

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<b>Kaiser Senior Advantage Summit HMO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$386.55	\$74.46	\$461.01
2 Party	\$773.10	\$148.93	\$922.03
Family	\$1,159.65	\$208.50	\$1,368.15
<b>Kaiser Senior Advantage Summit Out of State HMO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$380.21	\$74.46	\$454.67
2 Party	\$760.42	\$148.93	\$909.35
Family	\$1,140.63	\$208.50	\$1,349.13
<b>Anthem Select HMO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$1,138.86	\$74.46	\$1,213.32
2 Party	\$2,277.72	\$148.93	\$2,426.65
Family	\$2,961.04	\$208.50	\$3,169.54
<b>Anthem Traditional HMO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$1,339.70	\$74.46	\$1,414.16
2 Party	\$2,679.40	\$148.93	\$2,828.33
Family	\$3,483.22	\$208.50	\$3,691.72
<b>Anthem Medicare Preferred PPO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$405.83	\$74.46	\$480.29
2 Party	\$811.66	\$148.93	\$960.59
Family	\$1,217.49	\$208.50	\$1,425.99
<b>Anthem EPO Del Norte</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$1,314.27	\$74.46	\$1,388.73
2 Party	\$2,628.54	\$148.93	\$2,777.47
Family	\$3,417.10	\$208.50	\$3,625.60
<b>Blue Shield Access+ HMO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$1,076.84	\$74.46	\$1,151.30
2 Party	\$2,153.68	\$148.93	\$2,302.61
Family	\$2,799.78	\$208.50	\$3,008.28
<b>Blue Shield Trio HMO</b>	<b>CalPERS Rates</b>	<b>Dental/Vision</b>	<b>Medical/Dental/Vision</b>
Single	\$946.84	\$74.46	\$1,021.30
2 Party	\$1,893.68	\$148.93	\$2,042.61
Family	\$2,461.78	\$208.50	\$2,670.28

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<b>Blue Shield Medicare PPO</b>	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$392.68	\$74.46	\$467.14
2 Party	\$785.36	\$148.93	\$934.29
Family	\$1,178.04	\$208.50	\$1,386.54
<b>UnitedHealthCare Signature Alliance HMO</b>	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,091.13	\$74.46	\$1,165.59
2 Party	\$2,182.26	\$148.93	\$2,331.19
Family	\$2,836.94	\$208.50	\$3,045.44
<b>UnitedHealthCare Harmony HMO</b>	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$937.39	\$74.46	\$1,011.85
2 Party	\$1,874.78	\$148.93	\$2,023.71
Family	\$2,437.21	\$208.50	\$2,645.71
<b>UnitedHealthCare Group Medicare Advantage Edge PPO</b>	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$366.01	\$74.46	\$440.47
2 Party	\$732.02	\$148.93	\$880.95
Family	\$1,098.03	\$208.50	\$1,306.53
<b>UnitedHealthCare Group Advantage PPO</b>	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$341.72	\$74.46	\$416.18
2 Party	\$683.44	\$148.93	\$832.37
Family	\$1,025.16	\$208.50	\$1,233.66
<b>Western Health Advantage HMO</b>	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$807.23	\$74.46	\$881.69
2 Party	\$1,614.46	\$148.93	\$1,763.39
Family	\$2,098.80	\$208.50	\$2,307.30
<b>Western Health Advantage MyCare Select Medicare HMO</b>	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$268.62	\$74.46	\$343.08
2 Party	\$537.24	\$148.93	\$686.17
Family	\$805.86	\$208.50	\$1,014.36

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<b>PORAC</b>	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$931.00	\$74.46	\$1,005.46
2 Party	\$2,117.00	\$148.93	\$2,265.93
Family	\$2,651.00	\$208.50	\$2,859.50
<b>PORAC Medicare</b>	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$465.00	\$74.46	\$539.46
2 Party	\$1,030.00	\$148.93	\$1,178.93
Family	\$1,395.00	\$208.50	\$1,603.50

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