



EL CAMINO COMMUNITY COLLEGE DISTRICT

Fringe Benefits Premium/Employee Contributions

12 MONTH EMPLOYEES

2023 MEDICAL PLANS Monthly Rates

CALPERS ANTHEM BLUE CROSS PPO PLANS

PERS Platinum (90/10)	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$992.59	\$1,985.18	\$2,580.73
District Contribution	\$930.00	\$1,500.00	\$1,800.00
Employee Contribution	\$62.59	\$485.18	\$780.73

PERS Gold (80/20)	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$680.37	\$1,360.74	\$1,768.96
District Contribution	\$680.37	\$1,360.74	\$1,768.96
Employee Contribution	\$0.00	\$0.00	\$0.00

CALPERS HMO PLANS

Kaiser	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$754.64	\$1,509.28	\$1,962.06
District Contribution	\$754.64	\$1,500.00	\$1,800.00
Employee Contribution	\$0.00	\$9.28	\$162.06

Blue Shield Access + HMO	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$738.29	\$1,476.58	\$1,919.55
District Contribution	\$738.29	\$1,476.58	\$1,800.00
Employee Contribution	\$0.00	\$0.00	\$119.55

Blue Shield Trio HMO	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$661.49	\$1,322.98	\$1,719.87
District Contribution	\$661.49	\$1,322.98	\$1,719.87
Employee Contribution	\$0.00	\$0.00	\$0.00

2023 Maximum District Contributions	EMPLOYEE ONLY	TWO-PARTY	FAMILY
	\$930.00	\$1,500.00	\$1,800.00



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CALPERS HMO PLANS

Anthem HMO Select	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$737.91	\$1,475.82	\$1,918.57
District Contribution	\$737.91	\$1,475.82	\$1,800.00
Employee Contribution	\$0.00	\$0.00	\$118.57

Anthem HMO Traditional	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$942.73	\$1,885.46	\$2,451.10
District Contribution	\$930.00	\$1,500.00	\$1,800.00
Employee Contribution	\$12.73	\$385.46	\$651.10

Health Net Salud y Mas HMO	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$606.34	\$1,212.68	\$1,576.48
District Contribution	\$606.34	\$1,212.68	\$1,576.48
Employee Contribution	\$0.00	\$0.00	\$0.00

Health Net SmartCare HMO	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$755.29	\$1,510.58	\$1,963.75
District Contribution	\$755.29	\$1,500.00	\$1,800.00
Employee Contribution	\$0.00	\$10.58	\$163.75

UnitedHealthcare Alliance	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$790.46	\$1,580.92	\$2,055.20
District Contribution	\$790.46	\$1,500.00	\$1,800.00
Employee Contribution	\$0.00	\$80.92	\$255.20

UnitedHealthcare Harmony	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$713.55	\$1,427.10	\$1,855.23
District Contribution	\$713.55	\$1,427.10	\$1,800.00
Employee Contribution	\$0.00	\$0.00	\$55.23

2023 Maximum District Contributions	EMPLOYEE ONLY	TWO-PARTY	FAMILY
	\$930.00	\$1,500.00	\$1,800.00