

RETIREE RATES 2021-2022**RATES EFFECTIVE 7/1/2021**

	Monthly Cost	Quarterly Cost	Half Year Cost	Yearly Cost
<u>KAISER HMO 30</u>				
Single Party	\$68.75	\$206.25	\$825.00	\$825.00
Two-Party	\$336.80	\$1,010.40	\$4,041.60	\$4,041.60
Two-Party w/ spouse on group Kaiser Sr. Advantage	\$76.30	\$228.90	\$915.60	\$915.60
<u>KAISER REEP SENIOR ADVANTAGE (OVER 65)</u>				
Single Party	\$193.97	\$581.91	\$1,163.82	\$2,327.64
Two-Party	\$387.94	\$1,163.82	\$2,327.64	\$4,655.28
<u>KAISER DEDUCTIBLE HMO 500</u>				
Single Party	\$46.75	\$187.00	\$280.50	\$561.00
Two-Party	\$148.25	\$593.00	\$889.50	\$1,779.00
<u>ABC DHMO40 SELECT</u>				
Single Party	\$53.25	\$159.75	\$319.50	\$639.00
Two-Party	\$255.50	\$766.50	\$1,533.00	\$3,066.00
Family	\$730.98	\$2,192.93	\$4,385.85	\$8,771.70
<u>ABC HMO30</u>				
Single Party	\$64.25	\$192.75	\$385.50	\$771.00
Two-Party	\$363.00	\$1,089.00	\$2,178.00	\$4,356.00
Family	\$806.65	\$2,419.95	\$4,839.90	\$9,679.80
<u>ABC HMO20</u>				
		\$0.00		
Single Party	\$74.75	\$224.25	\$448.50	\$897.00
Two-Party	\$435.00	\$1,305.00	\$2,610.00	\$5,220.00
Family	\$856.93	\$2,570.78	\$5,141.55	\$10,283.10
<u>ABC PPO500 (CA & OOS)</u>				
Single Party	\$525.00	\$1,575.00	\$3,150.00	\$6,300.00
Two-Party	\$2,022.50	\$6,067.50	\$12,135.00	\$24,270.00
<u>ABC PPO750 (CALIF. ONLY)</u>				
Single Party	\$419.00	\$1,257.00	\$2,514.00	\$5,028.00
Two-Party	\$1,767.00	\$5,301.00	\$10,602.00	\$21,204.00
<u>ABC PPO HSA 1500 (CA & OUT OF STATE)</u>				
Single Party	\$0.00	\$0.00	\$0.00	\$0.00
Two-Party	\$851.00	\$2,553.00	\$5,106.00	\$10,212.00
<u>ABC PPO HSA 3000 (CA & OUT OF STATE)</u>				
Single Party	\$0.00	\$0.00	\$0.00	\$0.00
Two-Party	\$702.50	\$2,107.50	\$4,215.00	\$8,430.00

**ABC = ANTHEM BLUE CROSS

DELTA DENTAL LIFETIME BENEFIT (AFTER COMPLETING 18 MONTHS OF COBRA COVERAGE)

Single Party	100.24	\$300.72	\$601.44	\$1,202.88
Two-Party	\$186.25	\$558.75	\$1,117.50	\$2,235.00