

2012 CaPERS HEALTH RATES FOR FIRE UNITS

BAY AREA REGION: Sonoma, Marin, Napa, Alameda, Contra Costa, San Francisco, Santa Clara, Solano, San Joaquin, Yolo					OTHER NORTHERN CA COUNTIES: Lake, Mendocino, Humbolt				SACRAMENTO REGION: El Dorado, Placer Sacramento			
PERS Choice	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion
Single	1061	\$574.15	\$711.10	\$0.00	3221	\$559.25	\$711.10	\$0.00	1051	\$534.10	\$711.10	\$0.00
Double	1062	\$1,148.30	\$1,422.20	\$0.00	3222	\$1,118.50	\$1,422.20	\$0.00	1052	\$1,068.20	\$1,422.20	\$0.00
Family	1063	\$1,492.79	\$1,848.86	\$0.00	3223	\$1,454.05	\$1,848.86	\$0.00	1053	\$1,388.66	\$1,848.86	\$0.00
*Blue Shield Access+	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion
Single	1021	\$711.10	\$711.10	\$0.00	3031	\$704.69	\$711.10	\$0.00	1011	\$636.92	\$711.10	\$0.00
Double	1022	\$1,422.20	\$1,422.20	\$0.00	3032	\$1,409.38	\$1,422.20	\$0.00	1012	\$1,273.84	\$1,422.20	\$0.00
Family	1023	\$1,848.86	\$1,848.86	\$0.00	3033	\$1,832.19	\$1,848.86	\$0.00	1013	\$1,655.99	\$1,848.86	\$0.00
Kaiser	PERS Plan Code	Premium	Allowance	Bi-Monthly Employee Portion	PERS Plan Code	Premium	Allowance	Bi-Monthly Employee Portion	PERS Plan Code	Premium	Allowance	Bi-Monthly Employee Portion
Single	1041	\$610.44	\$711.10	\$0.00	3071	\$616.14	\$711.10	\$0.00	1031	\$562.69	\$711.10	\$0.00
Double	1042	\$1,220.88	\$1,422.20	\$0.00	3072	\$1,232.28	\$1,422.20	\$0.00	1032	\$1,125.38	\$1,422.20	\$0.00
Family	1043	\$1,587.14	\$1,848.86	\$0.00	3073	\$1,601.96	\$1,848.86	\$0.00	1033	\$1,462.99	\$1,848.86	\$0.00
PERS Care	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion
Single	1221	\$1,029.23	\$711.10	\$159.07	3271	\$1,002.53	\$711.10	\$145.72	1211	\$957.44	\$711.10	\$123.17
Double	1222	\$2,058.46	\$1,422.20	\$318.13	3272	\$2,005.06	\$1,422.20	\$291.43	1212	\$1,914.88	\$1,422.20	\$246.34
Family	1223	\$2,676.00	\$1,848.86	\$413.57	3273	\$2,606.58	\$1,848.86	\$378.86	1213	\$2,489.34	\$1,848.86	\$320.24
PERS Select	PERS Plan Code	Premium		Bi-Monthly Employee Portion	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion
Single	1261	\$487.39	\$711.10	\$0.00	531	\$474.74	\$711.10	\$0.00	1251	\$453.39	\$711.10	\$0.00
Double	1262	\$974.78	\$1,422.20	\$0.00	532	\$949.48	\$1,422.20	\$0.00	1252	\$906.78	\$1,422.20	\$0.00
Family	1263	\$1,267.21	\$1,848.86	\$0.00	533	\$1,234.32	\$1,848.86	\$0.00	1253	\$1,178.81	\$1,848.86	\$0.00
**PORAC	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion	PERS Plan Code	Premium	City Allowance	Bi-Monthly Employee Portion
Single	2071	\$556.00	\$711.10	\$0.00	2071	\$556.00	\$711.10	\$0.00	2071	\$556.00	\$711.10	\$0.00
Double	2072	\$1,041.00	\$1,422.20	\$0.00	2072	\$1,041.00	\$1,422.20	\$0.00	2072	\$1,041.00	\$1,422.20	\$0.00
Family	2073	\$1,323.00	\$1,848.86	\$0.00	2073	\$1,323.00	\$1,848.86	\$0.00	2073	\$1,323.00	\$1,848.86	\$0.00

*In Mendocino, Colusa, and Sierra Counties this is a EPO plan. In all other counties it is a HMO.

**Only unit 9 is eligible for the PORAC plan

If you live in a county that is not listed please contact benefits@srcity.org for rate information.