

Insurance Plan Rates

Monthly Insurance Premiums Effective July 1, 2019

		Self	Self + Child(ren)	Self + Adult	Family
Anthem Blue Cross HMO	Your Contribution	\$0.00	\$0.00	\$0.00	\$0.00
	UC Contribution	\$612.04	\$1060.50	\$1,454.39	\$1,848.34
Anthem Blue Cross PPO	Your Contribution	\$30.00	\$60.00	\$60.00	\$90.00
	UC Contribution	\$680.46	\$1202.91	\$1,470.27	\$2,071.67
Delta Dental PPO	Your Contribution	\$0.00	\$0.00	\$0.00	\$0.00
	UC Contribution	\$31.13	\$41.68	\$62.82	\$75.87
Vision Service Plan PPO	Your Contribution	\$0.00	\$0.00	\$0.00	\$0.00
	UC Contribution	\$6.75	\$10.39	\$10.28	\$16.03