

Insurance Plan Rates

Monthly Insurance Premiums Effective July 1, 2020

		Self	Self + Child(ren)	Self + Adult	Family
Anthem Blue Cross HMO	Your Contribution UC Contribution	\$0.00 \$626.45	\$0.00 \$1,085.47	\$0.00 \$1,488.63	\$0.00 \$1,891.86
Anthem Blue Cross PPO	Your Contribution UC Contribution	\$30.00 \$666.85	\$60.00 \$1,178.85	\$60.00 \$1,440.86	\$90.00 \$2,030.24
Delta Dental PPO	Your Contribution UC Contribution	\$0.00 \$31.22	\$0.00 \$41.81	\$0.00 \$63.01	\$0.00 \$76.10
Vision Service Plan PPO	Your Contribution UC Contribution	\$0.00 \$6.82	\$0.00 \$10.50	\$0.00 \$10.38	\$0.00 \$16.19