

# City of Thousand Oaks

## 2018 Medical Plan Rates

MEDICAL PLAN	Percent Change (+/-)	MONTHLY PREMIUM	CITY CAFETERIA PLAN (Medical \$435 + City Contribution \$730)	EMPLOYEE COST	AVAILABLE CASH BACK At 100% (for use on optional and/or voluntary benefits)	AVAILABLE CASH BACK \$700 maximum cash back (less premiums)
<b>PERS Care</b>	<b>-5.89</b>					
Employee Only		\$673.73	\$1,165.00		\$491.27	\$26.27
Employee +1		\$1,347.46	\$1,165.00	\$182.46		
Employee +2		\$1,751.70	\$1,165.00	\$586.70		
<b>PERS Choice</b>	<b>-2.69%</b>					
Employee Only		\$620.39	\$1,165.00		\$544.61	\$79.61
Employee +1		\$1,240.78	\$1,165.00	\$75.78		
Employee +2		\$1,613.01	\$1,165.00	\$448.01		
<b>PERS Select</b>	<b>+1.39</b>					
Employee Only		\$573.21	\$1,165.00		\$591.79	\$126.79
Employee +1		\$1,146.42	\$1,165.00		\$18.58	
Employee +2		\$1,490.35	\$1,165.00	\$325.35		
<b>Anthem HMO Select</b>	<b>+11.37</b>					
Employee Only		\$660.17	\$1,165.00		\$504.83	\$39.83
Employee +1		\$1,320.34	\$1,165.00	\$155.34		
Employee +2		\$1,716.44	\$1,165.00	\$551.44		
<b>Anthem HMO Traditional</b>	<b>+9.95</b>					
Employee Only		\$784.72	\$1,165.00		\$380.28	
Employee +1		\$1,569.44	\$1,165.00	\$404.44		
Employee +2		\$2,040.27	\$1,165.00	\$875.27		
<b>Blue Shield Access+</b>	<b>-9.27</b>					
Employee Only		\$613.29	\$1,165.00		\$551.71	\$86.71
Employee +1		\$1,226.58	\$1,165.00	\$61.58		
Employee +2		\$1,594.55	\$1,165.00	\$429.55		
<b>Health Net Salud y Más</b>	<b>-2.52</b>					
Employee Only		\$404.32	\$1,165.00		\$760.68	\$295.68
Employee +1		\$808.64	\$1,165.00		\$356.36	
Employee +2		\$1,051.23	\$1,165.00		\$113.77	
<b>Health Net SmartCare</b>	<b>+9.57</b>					
Employee Only		\$577.15	\$1,165.00		\$587.85	\$122.85
Employee +1		\$1,154.30	\$1,165.00		\$10.70	
Employee +2		\$1,500.59	\$1,165.00	\$335.59		
<b>Kaiser CA</b>	<b>+11.99</b>					
Employee Only		\$642.70	\$1,165.00		\$522.30	\$57.30
Employee +1		\$1,285.40	\$1,165.00	\$120.40		
Employee +2		\$1,671.02	\$1,165.00	\$506.02		
<b>UnitedHealthcare</b>	<b>+10.46</b>					
Employee Only		\$602.78	\$1,165.00		\$562.22	\$97.22
Employee +1		\$1,205.56	\$1,165.00	\$40.56		
Employee +2		\$1,567.23	\$1,165.00	\$402.23		
<b>WAIVE MEDICAL COVERAGE</b>			\$1,165.00		\$1,165.00	\$700.00

## HOW CAN I USE MY FLEXIBLE DOLLARS?

<p><b>100% use of monies</b></p> <p>Medical premium*</p> <p>Optional additional Term-Life Insurance*</p> <p>Optional Life**</p> <p>Optional Life with Long-Term Care**</p> <p>Critical Illness*</p> <p>Cancer*</p> <p>Accident Advantage*</p> <p>Hospital Advantage*</p> <p>Dental Supplemental Insurance*</p> <p>Health Care Flexible Spending Account</p> <p>Dependent Daycare Flexible Spending Account</p>	<p><b>MAXIMUM CASH BACK CAP</b> <b>\$700.00 per MONTH</b></p> <p>Cash **</p>
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## EXAMPLE

<p><b>PersCare Employee Only</b></p> <p><b>Medical Premium = \$673.73</b></p> <p><b>Remaining monies at 100% = \$491.27</b></p> <p><b>Can be used to purchase:</b></p> <p>Optional additional Term-Life Insurance*</p> <p>Optional Life**</p> <p>Optional Life with Long-Term Care**</p> <p>Critical Illness*</p> <p>Cancer*</p> <p>Accident Advantage*</p> <p>Hospital Advantage*</p> <p>Dental Supplemental Insurance*</p> <p>Health Care Flexible Spending Account</p> <p>Dependent Daycare Flexible Spending Account</p>	<p><b>If no Optional and/or Voluntary Benefits are purchased:</b></p> <p>Cash back = \$26.27 **</p> <p>(\$700.00 - \$673.73 = \$26.27)</p>
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\* On a pre-tax basis

\*\* Taxable