

2011-12 PREMIUM RATE TABLE

Rates Effective July 16, 2011*

Coverage Effective July 30, 2011

Plan	Coverage Type	2011-12 Bi-Weekly Rates	2010-11 Bi-Weekly Rates	Difference in Bi-Weekly Premium	Percentage Change from 2010-11
Health Net HMO	Employee Only	\$203.70	\$185.43	\$18.27	9.9%
	Employee + 1	\$435.57	\$396.41	\$39.16	9.9%
	Employee + 2	\$596.93	\$543.24	\$53.69	9.9%
Health Net PPO	Employee Only	\$411.84	\$374.82	\$37.02	9.9%
	Employee + 1	\$837.25	\$761.91	\$75.34	9.9%
	Employee + 2	\$1,298.41	\$1,181.53	\$116.88	9.9%
Health Net - Needles**	Employee Only	\$464.74	\$422.96	\$41.78	9.9%
	Employee + 1	\$944.57	\$859.56	\$85.01	9.9%
	Employee + 2	\$1,462.52	\$1,330.85	\$131.67	9.9%
Kaiser Permanente	Employee Only	\$240.09	\$208.57	\$31.52	15.1%
	Employee + 1	\$478.18	\$415.22	\$62.96	15.2%
	Employee + 2	\$675.79	\$586.75	\$89.04	15.2%
DeltaCare USA	Employee Only	\$9.91	\$9.55	\$0.36	3.8%
	Employee + 1	\$16.00	\$15.42	\$0.58	3.7%
	Employee + 2	\$20.85	\$20.11	\$0.74	3.7%
Delta Dental PPO	Employee Only	\$22.84	\$21.91	\$0.93	4.3%
	Employee + 1	\$42.14	\$40.38	\$1.76	4.4%
	Employee + 2	\$71.77	\$68.73	\$3.04	4.4%

*Premiums do not include any medical/dental premium subsidies and/or benefit plan dollars you may be eligible for. Please refer to the Benefit Plan Dollars and Premium Subsidies on page 13.

** For employees assigned to work in the Needles, Trona and Baker work locations, the County has established a "Needles Subsidy." The Needles Subsidy is paid by the employee's Department and is equal to the amount of the premium difference between the indemnity health plan offered in these specific work locations and the lowest cost health plan provided by the County. Specifically: \$261.04 for Employee Only coverage, \$509.00 for Employee + 1 coverage, and \$865.59 for Employee + 2 coverage.