

**SUPERVISORS  
ANTHEM BLUE CROSS  
&  
KAISER  
COMPOSITE MONTHLY RATES  
2022-2023**

PLANS	DISTRICT CAP Health \$987.00	HEALTH	EMPLOYEE	DENTAL	EMPLOYEE	DISTRICT CAP Dental \$126.42	VISION	EMPLOYEE	12 MO. RATE EMPLOYEE	11 MO. RATE EMPLOYEE
			PAYS		PAYS			PAYS	TOTAL	TOTAL
OTHER COVERAGE OPT OUT HEALTH PREMIUM	\$930.00		(\$57.00)	\$121.70	(\$4.72)		\$29.04	\$2.75	(\$58.97)	(\$64.33)
TRICARE OPT OUT FOR HEALTH COVERAGE	\$0.00		(\$987.00)	\$121.70	(\$4.72)		\$29.04	\$2.75	(\$988.97)	(\$1,078.88)
PLAN 1/ RX A	\$2,512.00		\$1,525.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$1,523.03	\$1,661.49
PLAN 4/ RX A	\$2,236.00		\$1,249.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$1,247.03	\$1,360.40
PLAN 6/ RX A	\$2,065.00		\$1,078.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$1,076.03	\$1,173.85
PLAN 8/ RX A	\$1,876.00		\$889.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$887.03	\$967.67
WELLNESS 1/RX C	\$2,072.00		\$1,085.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$1,083.03	\$1,181.49
HDHP-2 NO RX	\$1,265.00		\$278.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$276.03	\$301.12
CVT BRONZE PLAN	\$1,162.00		\$175.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$173.03	\$188.76
KAISER PLAN 1 W/RX	\$2,279.00		\$1,292.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$1,290.03	\$1,407.31
KAISER PLAN 4 W/RX	\$2,175.00		\$1,188.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$1,186.03	\$1,293.85
KAISER PLAN 6 W/RX	\$2,181.00		\$1,194.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$1,192.03	\$1,300.40
KAISER PLAN 8 W/RX	\$1,877.00		\$890.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$888.03	\$968.76
KAISER WELLNESS W/RX	\$1,781.00		\$794.00	\$121.70	(\$4.72)		\$29.04	\$2.75	\$792.03	\$864.03

EFFECTIVE 10/1/2022