

**City of Bakersfield  
2017 HEALTH INSURANCE RATES**

Full Time Employees Group Health Insurance

Bi-Weekly Rates for the 2017 Plan Year

EFFECTIVE 1/01/2017

EMPLOYEE CONTRIBUTION = 20% OF PREMIUMS

**MEDICAL**

<b>BLUE SHIELD PPO</b>	<u>Single</u>	<u>2 Party</u>	<u>Family</u>
Blue Shield PPO includes Mental Health & Prescription Drugs			
MES - VISION (Exam, Frame, Lenses)	\$2.23	\$4.48	\$5.84
Total Premium	\$258.01	\$516.91	\$775.86
City Pays	<u>\$206.41</u>	<u>\$413.53</u>	<u>\$620.69</u>
<b>Employee Pays</b>	<b><u>\$51.60</u></b>	<b><u>\$103.38</u></b>	<b><u>\$155.17</u></b>

<b>BLUE SHIELD HMO ACCESS+ (BFMC, IMG, GEMCARE)</b>	<u>Single</u>	<u>2 Party</u>	<u>Family</u>
Blue Shield HMO Plan includes Mental Health & Prescription Drugs			
MES - VISION (Frame & Lenses)	\$1.59	\$3.18	\$4.14
Total Premium	\$261.45	\$525.46	\$767.65
City Pays	<u>\$209.16</u>	<u>\$420.37</u>	<u>\$614.12</u>
<b>Employee Pays</b>	<b><u>\$52.29</u></b>	<b><u>\$105.09</u></b>	<b><u>\$153.53</u></b>

<b>BLUE SHIELD HMO TRIO (GEMCARE)</b>	<u>Single</u>	<u>2 Party</u>	<u>Family</u>
Blue Shield HMO Plan includes Mental Health & Prescription Drugs			
MES - VISION (Frame & Lenses)	\$1.59	\$3.18	\$4.14
Total Premium	\$213.49	\$429.05	\$626.72
City Pays	<u>\$170.79</u>	<u>\$343.24</u>	<u>\$501.38</u>
<b>Employee Pays</b>	<b><u>\$42.70</u></b>	<b><u>\$85.81</u></b>	<b><u>\$125.34</u></b>

<b>KAISER HMO</b>	<u>Single</u>	<u>2 Party</u>	<u>Family</u>
Plan includes Mental Health, Prescription Drugs and Eye Exam			
MES - VISION (Frame & Lenses)	\$1.59	\$3.18	\$4.14
Total Premium	\$207.12	\$414.24	\$585.79
City Pays	<u>\$165.70</u>	<u>\$331.40</u>	<u>\$468.63</u>
<b>Employee Pays</b>	<b><u>\$41.42</u></b>	<b><u>\$82.85</u></b>	<b><u>\$117.16</u></b>

**DENTAL**

<b>UNITED CONCORDIA PPO</b>	<u>Single</u>	<u>2 Party</u>	<u>Family</u>
United Concordia PPO	\$16.60	\$34.14	\$56.90
City Pays	<u>\$13.28</u>	<u>\$27.31</u>	<u>\$45.52</u>
<b>Employee Pays</b>	<b><u>\$3.32</u></b>	<b><u>\$6.83</u></b>	<b><u>\$11.38</u></b>

<b>UNITED CONCORDIA DHMO</b>	<u>Single</u>	<u>2 Party</u>	<u>Family</u>
United Concordia DHMO	\$9.58	\$17.56	\$27.69
City Pays	<u>\$7.66</u>	<u>\$14.05</u>	<u>\$22.15</u>
<b>Employee Pays</b>	<b><u>\$1.92</u></b>	<b><u>\$3.51</u></b>	<b><u>\$5.54</u></b>

**Medical Plans:**

**Children between the ages of 23-26** may be included **ONLY** on your **MEDICAL** plan (no vision or dental).

**Vision & Dental Plans:**

**Children between the ages of 19-23** may be included on your dental and vision plans as long as they are in school.

Questions ? Contact Human Resources at 326-3773 or e-mail [admhrs@bakersfieldcity.us](mailto:admhrs@bakersfieldcity.us)

<b>KAISER (High) DEDUCTIBLE HMO MEDICAL</b>	<u>Single</u>	<u>2 Party</u>	<u>Family</u>
Plan includes Mental Health, Prescription Drugs and Eye Exam			
MES - VISION (Frame & Lenses)	\$1.59	\$3.18	\$4.14
Total Premium	\$153.64	\$307.28	\$434.44
City Pays	<u>\$122.91</u>	<u>\$245.83</u>	<u>\$347.55</u>
<b>Employee Pays</b>	<b><u>\$30.73</u></b>	<b><u>\$61.46</u></b>	<b><u>\$86.89</u></b>