



Department of Human Resources Benefits Rates 2025 – General Unit

January 1, 2025 – December 31, 2025

All premium and deduction rates are based on monthly amounts

City Provided

Health Plan Allowance

Available only when a medical plan is selected

FTE Status	Single Rate	2 Party Rate	Family Rate
Full Time 1 FTE	951.00	1,833.00	2,487.00
Part Time .75 FTE	713.00	1,375.00	1,865.00
Part Time .50 FTE	476.00	917.00	1,244.00

Use the City provided Health Allowance to select benefit options that are best for you.

	Carrier	Single Rate	2 Party Rate	Family Rate
MEDICAL	Anthem Select HMO	916.88	1,833.76	2,383.89
	Anthem Traditional HMO	1,065.46	2,130.92	2,770.20
	Blue Shield Access+ HMO	828.48	1,656.96	2,154.05
	Blue Shield Trio HMO	738.11	1,476.22	1,919.09
	Kaiser Permanente	926.52	1,853.04	2,408.95
	PERS Gold PPO	868.15	1,736.30	2,257.19
	PERS Platinum PPO	1,263.73	2,527.46	3,285.70
	UnitedHealthcare Alliance HMO	866.40	1,732.80	2,252.64
	UnitedHealthcare Harmony HMO	756.28	1,512.56	1,966.33
	DENTAL	Delta PPO	42.62	90.70
Delta DHMO		17.23	29.82	39.08
VISION	VSP	13.42	13.42	13.42
EAP	Aetna Resources for Living	City Provided		
LIFE	New York Life	\$50,000 coverage / City Provided		
NOTES	Employees may elect to opt out and receive up to \$300 per month. Please refer to the General Unit MOU for more information.			