



# Department of Human Resources Benefits Rates 2025 – MAPS, EX, ELECTED

<b>January 1, 2025 – December 31, 2025</b> <b>All premium and deduction rates are based on monthly amounts</b>				
<b>City Provided Health Plan Allowance</b> <i>Available only when a medical plan is selected</i>	FTE Status	Single Rate	2 Party Rate	Family Rate
	Full Time 1 FTE	935.00	1,881.00	2,455.00
	Part Time .75 FTE	701.00	1,411.00	1,841.00
	Part Time .50 FTE	468.00	941.00	1,228.00
<b>Use the City provided Health Allowance to select benefit options that are best for you.</b>				
<b>MEDICAL</b>	Carrier	Single Rate	2 Party Rate	Family Rate
	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
<b>DENTAL</b>	Delta PPO	42.62	90.70	142.60
	Delta DHMO	17.23	29.82	39.08
<b>VISION</b>	VSP	13.42	13.42	13.42
<b>EAP</b>	Aetna Resources for Living	City Provided		
<b>LIFE</b>	New York Life	\$50,000 coverage / City Provided		
<b>NOTES</b>	<b>Employees may elect to opt out and receive up to \$300.00 per month. Please refer to the MAPS MOU for more information.</b>			