



**City of Richmond**  
**2022 City and Active Employee Contributions**

**2022 CalPERS Basic Health Plan Rates for Region 1**

**Counties covered in this region:** Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Glenn, Humboldt, Lake, Lassen, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Placer, Plumas, Sacramento, San Benito, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Stanislaus, Sutter, Tehama, Trinity, Tuolumne, Yolo, and Yuba

Health Plans	Single*			2-Party*			Family*		
	Total Monthly Premium	City Contribution	Employee Contribution	Total Monthly Premium	City Contribution	Employee Contribution	Total Monthly Premium	City Contribution	Employee Contribution
Anthem Blue Cross Select HMO	\$ 1,015.81	\$ 857.06	\$ 158.75	\$ 2,031.62	\$ 1,714.12	\$ 317.50	\$ 2,641.11	\$ 2,228.36	\$ 412.75
Anthem Blue Cross Traditional HMO	\$ 1,304.00	\$ 857.06	\$ 446.94	\$ 2,608.00	\$ 1,714.12	\$ 893.88	\$ 3,390.40	\$ 2,228.36	\$ 1,162.04
Blue Shield Access Plus HMO	\$ 1,116.01	\$ 857.06	\$ 258.95	\$ 2,232.02	\$ 1,714.12	\$ 517.90	\$ 2,901.63	\$ 2,228.36	\$ 673.27
Health Net SmartCare HMO	\$ 1,153.00	\$ 857.06	\$ 295.94	\$ 2,306.00	\$ 1,714.12	\$ 591.88	\$ 2,997.80	\$ 2,228.36	\$ 769.44
Kaiser Permanente HMO	\$ 857.06	\$ 857.06	NO COST	\$ 1,714.12	\$ 1,714.12	NO COST	\$ 2,228.36	\$ 2,228.36	NO COST
PERS Gold PPO	\$ 701.23	\$ 857.06	NO COST	\$ 1,402.46	\$ 1,714.12	NO COST	\$ 1,823.20	\$ 2,228.36	NO COST
PERS Platinum PPO	\$ 1,057.01	\$ 857.06	\$ 199.95	\$ 2,114.02	\$ 1,714.12	\$ 399.90	\$ 2,748.23	\$ 2,228.36	\$ 519.87
PORAC PPO <i>Sworn - Police Only</i>	\$ 799.00	\$ 857.06	NO COST	\$ 1,725.00	\$ 1,714.12	\$ 10.88	\$ 2,219.00	\$ 2,228.36	NO COST
Western Health Advantage HMO	\$ 741.26	\$ 857.06	NO COST	\$ 1,482.52	\$ 1,714.12	NO COST	\$ 1,927.28	\$ 2,228.36	NO COST
Important: All premiums paid by the employee are paid via payroll deductions twice a month. Please refer to the 2022 CalPERS Health Benefit Summary publication to determine availability of health plans if you reside outside of Contra Costa County									

\*Employees covered under the following employee groups, contribute an additional \$125 a month regardless of what medical plan they are enrolled in:  
**Fire (IAFF and RFMA)**                      **Management (IFPTE)**                      **Executive Management (IFPTE)**

**Example: Employee in the Management group is enrolled in the Kaiser Family plan. Employee's out of pocket cost is \$125 a month; the City's contribution is \$2103.36**