



West Valley-Mission
Community College District

Health Care Plan Options and Costs Changes from 2024 to 2025 Employee Contributions Per Pay Period 11-Month Full-Time Employees

	DeltaCare HMO			DeltaCare HMO & VSP			Delta PPO			Delta PPO & VSP		
	2024	2025	Change from 2024	2024	2025	Change from 2024	2024	2025	Change from 2024	2024	2025	Change from 2024
Anthem Select HMO												
Employee Only	\$57.10	\$69.07	\$11.97	\$73.99	\$84.78	\$10.79	\$109.34	\$128.10	\$18.76	\$126.23	\$143.81	\$17.58
Employee +1	\$181.95	\$209.78	\$27.83	\$198.83	\$225.49	\$26.66	\$234.19	\$268.81	\$34.62	\$251.08	\$284.52	\$33.44
Employee + 2 or More	\$256.93	\$294.22	\$37.29	\$273.82	\$309.93	\$36.11	\$309.17	\$353.25	\$44.08	\$326.06	\$368.96	\$42.90
Anthem Traditional HMO												
Employee Only	\$276.20	\$334.98	\$58.78	\$293.08	\$350.69	\$57.61	\$328.44	\$394.01	\$65.57	\$345.33	\$409.72	\$64.39
Employee +1	\$620.14	\$741.60	\$121.46	\$637.03	\$757.31	\$120.28	\$672.39	\$800.63	\$128.24	\$689.27	\$816.33	\$127.06
Employee + 2 or More	\$826.58	\$985.59	\$159.01	\$843.47	\$1,001.29	\$157.82	\$878.83	\$1,044.61	\$165.78	\$895.71	\$1,060.32	\$164.61
Blue Shield Access+ HMO												
Employee Only	\$0.00	\$0.00	\$0.00	\$6.33	\$0.00	-\$6.33	\$41.68	\$33.76	-\$7.92	\$58.57	\$49.47	-\$9.10
Employee +1	\$46.63	\$21.09	-\$25.54	\$63.52	\$36.80	-\$26.72	\$98.87	\$80.12	-\$18.75	\$115.76	\$95.83	-\$19.93
Employee + 2 or More	\$81.01	\$48.93	-\$32.08	\$97.90	\$64.64	-\$33.26	\$133.25	\$107.96	-\$25.29	\$150.14	\$123.67	-\$26.47
Blue Shield Trio HMO												
Employee Only		\$0.00			\$0.00			\$0.00			\$10.87	
Employee +1	not available	\$0.00	n/a	not available	\$0.00	n/a	not available	\$2.93	n/a	not available	\$18.64	n/a
Employee + 2 or More		\$0.00			\$0.00			\$7.61			\$23.32	
Kaiser HMO												
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee +1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
UnitedHealthCare Alliance HMO												
Employee Only	\$5.03	\$0.00	-\$5.03	\$21.92	\$6.16	-\$15.76	\$57.27	\$49.48	-\$7.79	\$74.16	\$65.19	-\$8.97
Employee +1	\$77.81	\$52.53	-\$25.28	\$94.69	\$68.24	-\$26.45	\$130.05	\$111.56	-\$18.49	\$146.94	\$127.27	-\$19.67
Employee + 2 or More	\$121.55	\$89.81	-\$31.74	\$138.44	\$105.52	-\$32.92	\$173.79	\$148.84	-\$24.95	\$190.68	\$164.55	-\$26.13
UnitedHealthCare Harmony HMO												
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee +1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERS Gold PPO												
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee +1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERS Platinum PPO												
Employee Only	\$248.45	\$308.47	\$60.02	\$265.34	\$324.18	\$58.84	\$300.70	\$367.50	\$66.80	\$317.59	\$383.21	\$65.62
Employee +1	\$564.66	\$688.58	\$123.92	\$581.55	\$704.29	\$122.74	\$616.90	\$747.61	\$130.71	\$633.79	\$763.32	\$129.53
Employee + 2 or More	\$754.45	\$916.66	\$162.21	\$771.34	\$932.37	\$161.03	\$806.69	\$975.69	\$169.00	\$823.58	\$991.40	\$167.82



West Valley-Mission
Community College District

Health Care Plan Options and Costs

Changes from 2024 to 2025

Employee Contributions Per Pay Period

10-Month Full-Time Employees

	DeltaCare HMO			DeltaCare HMO & VSP			Delta PPO			Delta PPO & VSP		
	2024	2025	Change from 2024	2024	2025	Change from 2024	2024	2025	Change from 2024	2024	2025	Change from 2024
Anthem Select HMO												
Employee Only	\$62.81	\$75.98	\$13.17	\$81.38	\$93.26	\$11.88	\$120.28	\$140.91	\$20.63	\$138.85	\$158.19	\$19.34
Employee +1	\$200.14	\$230.76	\$30.62	\$218.72	\$248.04	\$29.32	\$257.61	\$295.69	\$38.08	\$276.18	\$312.97	\$36.79
Employee + 2 or More	\$282.62	\$323.64	\$41.02	\$301.20	\$340.92	\$39.72	\$340.09	\$388.58	\$48.49	\$358.67	\$405.86	\$47.19
Anthem Traditional HMO												
Employee Only	\$303.82	\$368.48	\$64.66	\$322.39	\$385.76	\$63.37	\$361.28	\$433.41	\$72.13	\$379.86	\$450.69	\$70.83
Employee +1	\$682.16	\$815.76	\$133.60	\$700.73	\$833.04	\$132.31	\$739.62	\$880.69	\$141.07	\$758.20	\$897.97	\$139.77
Employee + 2 or More	\$909.24	\$1,084.14	\$174.90	\$927.82	\$1,101.42	\$173.60	\$966.71	\$1,149.08	\$182.37	\$985.28	\$1,166.36	\$181.08
Blue Shield Access+ HMO												
Employee Only	\$0.00	\$0.00	\$0.00	\$6.96	\$0.00	-\$6.96	\$45.85	\$37.13	-\$8.72	\$64.43	\$54.41	-\$10.02
Employee +1	\$51.29	\$23.20	-\$28.09	\$69.87	\$40.48	-\$29.39	\$108.76	\$88.14	-\$20.62	\$127.34	\$105.42	-\$21.92
Employee + 2 or More	\$89.11	\$53.82	-\$35.29	\$107.69	\$71.10	-\$36.59	\$146.58	\$118.76	-\$27.82	\$165.16	\$136.04	-\$29.12
Blue Shield Trio HMO												
Employee Only		\$0.00			\$0.00			\$0.00			\$11.96	
Employee +1	not available	\$0.00	n/a	not available	\$0.00	n/a	not available	\$3.22	n/a	not available	\$20.50	n/a
Employee + 2 or More		\$0.00			\$0.00			\$8.37			\$25.65	
Kaiser HMO												
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee +1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
UnitedHealthCare Alliance HMO												
Employee Only	\$5.53	\$0.00	-\$5.53	\$24.11	\$6.77	-\$17.34	\$63.00	\$54.42	-\$8.58	\$81.58	\$71.70	-\$9.88
Employee +1	\$85.59	\$57.79	-\$27.80	\$104.16	\$75.07	-\$29.09	\$143.06	\$122.72	-\$20.34	\$161.63	\$140.00	-\$21.63
Employee + 2 or More	\$133.70	\$98.79	-\$34.91	\$152.28	\$116.07	-\$36.21	\$191.17	\$163.72	-\$27.45	\$209.75	\$181.00	-\$28.75
UnitedHealthCare Harmony HMO												
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee +1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERS Gold PPO												
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee +1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERS Platinum PPO												
Employee Only	\$273.30	\$339.32	\$66.02	\$291.88	\$356.60	\$64.72	\$330.77	\$404.25	\$73.48	\$349.34	\$421.53	\$72.19
Employee +1	\$621.12	\$757.44	\$136.32	\$639.70	\$774.72	\$135.02	\$678.59	\$822.37	\$143.78	\$697.17	\$839.65	\$142.48
Employee + 2 or More	\$829.90	\$1,008.33	\$178.43	\$848.47	\$1,025.61	\$177.14	\$887.36	\$1,073.26	\$185.90	\$905.94	\$1,090.54	\$184.60