



**West Valley - Mission**  
Community College District

## Health Care Plan Options and Costs Changes from 2023 to 2024 Employee Contributions Per Pay Period WVMCEA

	DeltaCare HMO			DeltaCare HMO & VSP			Delta PPO			Delta PPO & VSP		
	2023	2024	Change from 2023	2023	2024	Change from 2023	2023	2024	Change from 2023	2023	2024	Change from 2023
<b>Anthem Select HMO</b>												
Employee Only	\$42.31	\$52.34	<b>\$10.03</b>	\$57.79	\$67.82	<b>\$10.03</b>	\$90.20	\$100.23	<b>\$10.03</b>	\$105.68	\$115.71	<b>\$10.03</b>
Employee + 1	\$146.72	\$166.78	<b>\$20.06</b>	\$162.20	\$182.26	<b>\$20.06</b>	\$194.61	\$214.67	<b>\$20.06</b>	\$210.09	\$230.15	<b>\$20.06</b>
Employee + 2 or More	\$209.44	\$235.52	<b>\$26.08</b>	\$224.94	\$251.00	<b>\$26.06</b>	\$257.33	\$283.41	<b>\$26.08</b>	\$272.81	\$298.89	<b>\$26.08</b>
<b>Anthem Traditional HMO</b>												
Employee Only	\$124.19	\$253.18	<b>\$128.99</b>	\$139.67	\$268.66	<b>\$128.99</b>	\$172.08	\$301.07	<b>\$128.99</b>	\$187.56	\$316.55	<b>\$128.99</b>
Employee + 1	\$310.48	\$568.46	<b>\$257.98</b>	\$325.96	\$583.94	<b>\$257.98</b>	\$358.37	\$616.35	<b>\$257.98</b>	\$373.85	\$631.83	<b>\$257.98</b>
Employee + 2 or More	\$422.33	\$757.70	<b>\$335.37</b>	\$437.81	\$773.18	<b>\$335.37</b>	\$470.22	\$805.59	<b>\$335.37</b>	\$485.70	\$821.07	<b>\$335.37</b>
<b>Blue Shield Access+ HMO</b>												
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$5.80	<b>\$5.80</b>	\$0.00	\$38.21	<b>\$38.21</b>	\$12.06	\$53.69	<b>\$41.63</b>
Employee + 1	\$0.00	\$42.74	<b>\$42.74</b>	\$0.00	\$58.22	<b>\$58.22</b>	\$7.37	\$90.63	<b>\$83.26</b>	\$22.85	\$106.11	<b>\$83.26</b>
Employee + 2 or More	\$0.00	\$74.26	<b>\$74.26</b>	\$0.00	\$89.74	<b>\$89.74</b>	\$13.92	\$122.15	<b>\$108.23</b>	\$29.40	\$137.63	<b>\$108.23</b>
<b>Kaiser HMO</b>												
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
<b>PERS Gold PPO</b>												
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
<b>PERS Platinum PPO</b>												
Employee Only	\$113.60	\$227.75	<b>\$114.15</b>	\$129.08	\$243.23	<b>\$114.15</b>	\$161.49	\$275.64	<b>\$114.15</b>	\$176.97	\$291.12	<b>\$114.15</b>
Employee + 1	\$289.30	\$517.60	<b>\$228.30</b>	\$304.78	\$533.08	<b>\$228.30</b>	\$337.19	\$565.49	<b>\$228.30</b>	\$352.67	\$580.97	<b>\$228.30</b>
Employee + 2 or More	\$394.79	\$691.58	<b>\$296.79</b>	\$410.27	\$707.06	<b>\$296.79</b>	\$442.68	\$739.47	<b>\$296.79</b>	\$458.16	\$754.95	<b>\$296.79</b>





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Community College District

## Health Care Plan Options and Costs Changes from 2023 to 2024 Employee Contributions Per Pay Period 11-Month Faculty

	DeltaCare HMO			DeltaCare HMO & VSP			Delta PPO			Delta PPO & VSP		
	2023	2024	Change from 2023	2023	2024	Change from 2023	2023	2024	Change from 2023	2023	2024	Change from 2023
<b>Anthem Select HMO</b>												
Employee Only	\$160.16	\$57.10	-\$103.06	\$177.04	\$73.99	-\$103.05	\$212.40	\$109.34	-\$103.06	\$229.29	\$126.23	-\$103.06
Employee + 1	\$382.52	\$181.95	-\$200.57	\$399.40	\$198.83	-\$200.57	\$434.76	\$234.19	-\$200.57	\$451.65	\$251.08	-\$200.57
Employee + 2 or More	\$515.93	\$256.93	-\$259.00	\$532.82	\$273.82	-\$259.00	\$568.18	\$309.17	-\$259.01	\$585.07	\$326.06	-\$259.01
<b>Anthem Traditional HMO</b>												
Employee Only	\$249.48	\$276.20	\$26.72	\$266.37	\$293.08	\$26.71	\$301.72	\$328.44	\$26.72	\$318.61	\$345.33	\$26.72
Employee + 1	\$561.16	\$620.14	\$58.98	\$578.05	\$637.03	\$58.98	\$613.41	\$672.39	\$58.98	\$630.29	\$689.27	\$58.98
Employee + 2 or More	\$748.18	\$826.58	\$78.40	\$765.07	\$843.47	\$78.40	\$800.42	\$878.83	\$78.41	\$817.31	\$895.71	\$78.40
<b>Blue Shield Access+ HMO</b>												
Employee Only	\$58.03	\$0.00	-\$58.03	\$74.91	\$6.33	-\$68.58	\$110.27	\$41.68	-\$68.59	\$127.16	\$58.57	-\$68.59
Employee + 1	\$178.25	\$46.63	-\$131.62	\$195.14	\$63.52	-\$131.62	\$230.50	\$98.87	-\$131.63	\$247.39	\$115.76	-\$131.63
Employee + 2 or More	\$250.40	\$81.01	-\$169.39	\$267.28	\$97.90	-\$169.38	\$302.64	\$133.25	-\$169.39	\$319.53	\$150.14	-\$169.39
<b>Kaiser HMO</b>												
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
<b>PERS Gold PPO</b>												
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
<b>PERS Platinum PPO</b>												
Employee Only	\$237.93	\$248.45	\$10.52	\$254.81	\$265.34	\$10.53	\$290.17	\$300.70	\$10.53	\$307.06	\$317.59	\$10.53
Employee + 1	\$538.06	\$564.66	\$26.60	\$554.95	\$581.55	\$26.60	\$590.30	\$616.90	\$26.60	\$607.19	\$633.79	\$26.60
Employee + 2 or More	\$718.13	\$754.45	\$36.32	\$735.02	\$771.34	\$36.32	\$770.38	\$806.69	\$36.31	\$787.27	\$823.58	\$36.31



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## Health Care Plan Options and Costs

### Changes from 2023 to 2024

### Employee Contributions Per Pay Period

### 10-Month Faculty

	DeltaCare HMO			DeltaCare HMO & VSP			Delta PPO			Delta PPO & VSP		
	2023	2024	Change from 2023	2023	2024	Change from 2023	2023	2024	Change from 2023	2023	2024	Change from 2023
<b>Anthem Select HMO</b>												
Employee Only	\$176.17	\$62.81	-\$113.36	\$194.75	\$81.38	-\$113.37	\$233.64	\$120.28	-\$113.36	\$252.22	\$138.85	-\$113.37
Employee + 1	\$420.77	\$200.14	-\$220.63	\$439.34	\$218.72	-\$220.62	\$478.24	\$257.61	-\$220.63	\$496.81	\$276.18	-\$220.63
Employee + 2 or More	\$567.53	\$282.62	-\$284.91	\$586.10	\$301.20	-\$284.90	\$625.00	\$340.09	-\$284.91	\$643.57	\$358.67	-\$284.90
<b>Anthem Traditional HMO</b>												
Employee Only	\$274.43	\$303.82	\$29.39	\$293.00	\$322.39	\$29.39	\$331.90	\$361.28	\$29.38	\$350.47	\$379.86	\$29.39
Employee + 1	\$617.28	\$682.16	\$64.88	\$635.86	\$700.73	\$64.87	\$674.75	\$739.62	\$64.87	\$693.32	\$758.20	\$64.88
Employee + 2 or More	\$823.00	\$909.24	\$86.24	\$841.57	\$927.82	\$86.25	\$880.46	\$966.71	\$86.25	\$899.04	\$985.28	\$86.24
<b>Blue Shield Access+ HMO</b>												
Employee Only	\$63.83	\$0.00	-\$63.83	\$82.40	\$6.96	-\$75.44	\$121.30	\$45.85	-\$75.45	\$139.87	\$64.43	-\$75.44
Employee + 1	\$196.08	\$51.29	-\$144.79	\$214.66	\$69.87	-\$144.79	\$253.55	\$108.76	-\$144.79	\$272.12	\$127.34	-\$144.78
Employee + 2 or More	\$275.44	\$89.11	-\$186.33	\$294.01	\$107.69	-\$186.32	\$332.90	\$146.58	-\$186.32	\$351.48	\$165.16	-\$186.32
<b>Kaiser HMO</b>												
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
<b>PERS Gold PPO</b>												
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
<b>PERS Platinum PPO</b>												
Employee Only	\$261.72	\$273.30	\$11.58	\$280.30	\$291.88	\$11.58	\$319.19	\$330.77	\$11.58	\$337.76	\$349.34	\$11.58
Employee + 1	\$591.86	\$621.12	\$29.26	\$610.44	\$639.70	\$29.26	\$649.33	\$678.59	\$29.26	\$667.91	\$697.17	\$29.26
Employee + 2 or More	\$789.95	\$829.90	\$39.95	\$808.52	\$848.47	\$39.95	\$847.42	\$887.36	\$39.94	\$865.99	\$905.94	\$39.95