

3/3/2011 *Applied to cut 1:45 p.m. Call for packets together*

UNIVERSITY OF CALIFORNIA:
MONTHLY COST OF MEDICAL PLANS
FOR EMPLOYEES WITH FULL-TIME SALARY RATE OF \$47,000 AND UNDER AND ACTIVE EMPLOYEES WITH PRIMARY MEDICARE COVERAGE

1/1/2011-12/31/2011

APPENDIX B-2
Pay Band 1

MEDICAL PLAN	Non-Medicare				Medicare			Split-Medicare			Family (2)
	U	UC	UA	UAC	M	MM	MMM	MA	MC	MAC	
	Single	Child(ren)	Two Adults	Family	Single	Two Party	Family	Two Adults	Adult plus Child(ren)	Family (1)	Family (2)
2011 GROSS/NET EMPLOYEE COST											
Health Net Blue & Gold HMO (HB & HE) (3)											
Gross Rates	517.71	931.88	1,087.19	1,501.36	336.36	672.72	1,009.08	905.84	750.53	1,320.01	1,086.89
Employer Contribution	496.50	893.70	999.78	1,396.98	336.36	672.72	1,009.08	905.84	750.53	1,294.78	1,086.89
Net Cost	21.21	38.18	87.41	104.38	0.00	0.00	0.00	0.00	0.00	25.23	0.00
Health Net HMO (HN & HC) (4)											
Gross Rates	570.90	1,027.62	1,198.89	1,655.61	336.36	672.72	1,009.08	964.35	793.08	1,421.07	1,209.85
Employer Contribution	496.50	893.70	999.78	1,396.98	336.36	672.72	1,009.08	924.10	793.08	1,294.78	1,209.85
Net Cost	74.40	133.92	199.11	258.63	0.00	0.00	0.00	40.25	0.00	126.29	0.00
Kaiser Permanente - CA (KN & KS)											
Gross Rates	465.44	837.79	977.43	1,349.78	235.17	470.34	705.51	747.16	607.52	1,119.51	842.69
Employer Contribution	457.99	824.38	961.78	1,328.17	235.17	470.34	705.51	747.16	607.52	1,119.51	842.69
Net Cost	7.45	13.41	15.65	21.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Anthem Blue Cross PLUS (BC)											
Gross Rates	573.99	1,033.18	1,205.38	1,664.57	388.02	776.04	1,164.06	1,019.41	847.21	1,478.60	1,312.96
Employer Contribution	496.50	893.70	999.78	1,396.98	388.02	776.04	1,164.06	924.10	834.03	1,294.78	1,294.78
Net Cost	77.49	139.48	205.60	267.59	0.00	0.00	0.00	95.31	13.18	183.82	18.18
Anthem Blue Cross PPO (BP)											
Gross Rates	589.82	1,061.68	1,238.63	1,710.47	349.73	699.46	1,049.19	998.54	821.59	1,470.38	1,238.36
Employer Contribution	496.50	893.70	999.78	1,396.98	349.73	699.46	1,049.19	924.10	821.59	1,294.78	1,238.36
Net Cost	93.32	167.98	238.85	313.49	0.00	0.00	0.00	74.44	0.00	175.60	0.00
Western Health Advantage (WH)											
Gross Rates	458.62	825.51	963.10	1,330.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Employer Contribution	451.17	812.10	947.45	1,308.39	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Net Cost	7.45	13.41	15.65	21.61	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CORE Major Medical (CM)											
Gross Rates	70.70	127.26	148.47	205.03	150.81	301.62	452.43	228.58	207.37	285.14	358.18
Employer Contribution	70.70	127.26	148.47	205.03	150.81	301.62	452.43	228.58	207.37	285.14	358.18
Net Cost	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

APPENDIX B-2
Pay Band I

UNIVERSITY OF CALIFORNIA:
MONTHLY COST OF MEDICAL PLANS
FOR EMPLOYEES WITH FULL-TIME SALARY RATE OF \$47,000 AND UNDER AND ACTIVE EMPLOYEES WITH PRIMARY MEDICARE COVERAGE

1/1/2011-12/31/2011

MEDICAL PLAN	Non-Medicare			Medicare			Split-Medicare			
	U	UA	UAC	M	MM	MMM	MA	MC	MAC	MMC
	Single	Two Adults	Family	Single	Two Party	Family	Two Adults	Adult plus Child(ren)	Family (1)	Family (2)
Kaiser Umbrella (KU)										
Gross Rates	611.12	1,283.35	1,772.25	236.95	473.90	710.85	909.18	725.85	1,398.08	962.80
Employer Contribution	496.50	999.78	1,396.98	236.95	473.90	710.85	909.18	725.85	1,294.78	962.80
Net Cost	114.62	283.57	375.27	0.00	0.00	0.00	0.00	0.00	103.30	0.00
Anthem Lumenos PPO with HRA (BL)										
Gross Rates	484.19	1,016.80	1,404.15	411.42	822.84	1,234.26	944.03	798.47	1,331.38	1,215.55
Employer Contribution	476.74	999.78	1,382.54	411.42	822.84	1,234.26	924.10	798.47	1,280.34	1,215.55
Net Cost	7.45	13.41	21.61	0.00	0.00	0.00	19.93	0.00	51.04	0.00

2011 GROSS/NET EMPLOYEE COST

NOTES:

- (1) MAC = Split Medicare family with at least one Non-Medicare Adult
- (2) MMC = Split Medicare family with two Medicare Adults plus Child(ren)
- (3) Rates for EPO and rates for Medicare families in Seniority Plus and Medicare COB with non-Medicare members enrolled in Health Net Blue & Gold
- (4) Rates for Medicare families in Seniority Plus and Medicare COB with non-Medicare members enrolled in Health Net HMO

APPENDIX B-2
Pay Band 2

UNIVERSITY OF CALIFORNIA:
MONTHLY COST OF MEDICAL PLANS
FOR EMPLOYEES WITH FULL-TIME SALARY RATE OF \$47,001 TO \$93,000 AND ACTIVE EMPLOYEES WITH PRIMARY MEDICARE COVERAGE
1/1/2011-12/31/2011

MEDICAL PLAN	Non-Medicare			Medicare			Split-Medicare				
	U	UC	UA	UAC	M	MM	MMM	MA	MC	MAC	MMC
	Single	Adult plus Child(ren)	Two Adults	Family	Single	Two Party	Family	Two Adults	Adult plus Child(ren)	Family (1)	Family (2)
2011 GROSS/NET EMPLOYEE COST											
Health Net Blue & Gold HMO (HB & HE) (3)											
Gross Rates	517.71	931.88	1,087.19	1,501.36	336.36	672.72	1,009.08	905.84	750.53	1,320.01	1,086.89
Employer Contribution	463.35	834.03	924.10	1,294.78	336.36	672.72	1,009.08	905.84	750.53	1,294.78	1,086.89
Net Cost	54.36	97.85	163.09	206.58	0.00	0.00	0.00	0.00	0.00	25.23	0.00
Health Net HMO (HN & HC) (4)											
Gross Rates	570.90	1,027.62	1,198.89	1,655.61	336.36	672.72	1,009.08	964.35	793.08	1,421.07	1,209.85
Employer Contribution	463.35	834.03	924.10	1,294.78	336.36	672.72	1,009.08	924.10	793.08	1,294.78	1,209.85
Net Cost	107.55	193.59	274.79	360.83	0.00	0.00	0.00	40.25	0.00	126.29	0.00
Kaiser Permanente - CA (KN & KS)											
Gross Rates	465.44	837.79	977.43	1,349.78	235.17	470.34	705.51	747.16	607.52	1,119.51	842.69
Employer Contribution	424.84	764.71	886.10	1,225.97	235.17	470.34	705.51	747.16	607.52	1,119.51	842.69
Net Cost	40.60	73.08	91.33	123.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Anthem Blue Cross PLUS (BC)											
Gross Rates	573.99	1,033.18	1,205.38	1,664.57	388.02	776.04	1,164.06	1,019.41	847.21	1,478.60	1,312.96
Employer Contribution	463.35	834.03	924.10	1,294.78	388.02	776.04	1,164.06	924.10	834.03	1,294.78	1,294.78
Net Cost	110.64	199.15	281.28	369.79	0.00	0.00	0.00	95.31	13.18	183.82	18.18
Anthem Blue Cross PPO (BP)											
Gross Rates	589.82	1,061.68	1,238.63	1,710.47	349.73	699.46	1,049.19	998.54	821.59	1,470.38	1,238.36
Employer Contribution	463.35	834.03	924.10	1,294.78	349.73	699.46	1,049.19	924.10	821.59	1,294.78	1,238.36
Net Cost	126.47	227.65	314.53	415.69	0.00	0.00	0.00	74.44	0.00	175.60	0.00
Western Health Advantage (WH)											
Gross Rates	458.62	825.51	963.10	1,330.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Employer Contribution	418.02	752.43	871.77	1,206.19	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Net Cost	40.60	73.08	91.33	123.81	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CORE Major Medical (CM)											
Gross Rates	70.70	127.26	148.47	205.03	150.81	301.62	452.43	228.58	207.37	285.14	358.18
Employer Contribution	70.70	127.26	148.47	205.03	150.81	301.62	452.43	228.58	207.37	285.14	358.18
Net Cost	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

APPENDIX B-2
Pay Band 2

UNIVERSITY OF CALIFORNIA:
MONTHLY COST OF MEDICAL PLANS
FOR EMPLOYEES WITH FULL-TIME SALARY RATE OF \$47,001 TO \$93,000 AND ACTIVE EMPLOYEES WITH PRIMARY MEDICARE COVERAGE

1/1/2011-12/31/2011

MEDICAL PLAN	Non-Medicare			Medicare			Split-Medicare				
	U	UC	UA	UAC	M	MM	MMM	MA	MC	MAC	MMC
	Single	Adult plus Child(ren)	Two Adults	Family	Single	Two Party	Family	Two Adults	Adult plus Child(ren)	Family (1)	Family (2)
2011 GROSS/NET EMPLOYEE COST											
Kaiser Umbrella (KU)											
Gross Rates	611.12	1,100.02	1,283.35	1,772.25	236.95	473.90	710.85	909.18	725.85	1,398.08	962.80
Employer Contribution	463.35	834.03	924.10	1,294.78	236.95	473.90	710.85	909.18	725.85	1,294.78	962.80
Net Cost	147.77	265.99	359.25	477.47	0.00	0.00	0.00	0.00	0.00	103.30	0.00
Anthem Lumenos PPO with HRA (BL)											
Gross Rates	484.19	871.55	1,016.80	1,404.15	411.42	822.84	1,234.26	944.03	798.47	1,331.38	1,215.55
Employer Contribution	443.59	798.47	924.10	1,280.34	411.42	822.84	1,234.26	924.10	798.47	1,280.34	1,215.55
Net Cost	40.60	73.08	92.70	123.81	0.00	0.00	0.00	19.93	0.00	51.04	0.00

NOTES:

- (1) MAC = Split Medicare family with at least one Non-Medicare Adult
- (2) MMC = Split Medicare family with two Medicare Adults plus Child(ren)
- (3) Rates for EPO and rates for Medicare families in Seniority Plus and Medicare COB with non-Medicare members enrolled in Health Net Blue & Gold
- (4) Rates for Medicare families in Seniority Plus and Medicare COB with non-Medicare members enrolled in Health Net HMO

APPENDIX B-2
Pay Band 3

UNIVERSITY OF CALIFORNIA:
MONTHLY COST OF MEDICAL PLANS
FOR EMPLOYEES WITH FULL-TIME SALARY RATE OF \$93,001 TO \$140,000 AND ACTIVE EMPLOYEES WITH PRIMARY MEDICARE COVERAGE

1/1/2011-12/31/2011

MEDICAL PLAN	Non-Medicare			Medicare			Split-Medicare				
	U	UC	UA	UAC	M	MM	MMM	MA	MC	MAC	MMC
	Single	Adult plus Child(ren)	Two Adults	Family	Single	Two Party	Family	Two Adults	Adult plus Child(ren)	Family (1)	Family (2)
2011 GROSS/NET EMPLOYEE COST											
Health Net Blue & Gold HMO (HB & HE) (3)											
Gross Rates	517.71	931.88	1,087.19	1,501.36	336.36	672.72	1,009.08	905.84	750.53	1,320.01	1,086.89
Employer Contribution	429.33	772.79	856.28	1,199.74	336.36	672.72	1,009.08	905.84	750.53	1,294.78	1,086.89
Net Cost	88.38	159.09	230.91	301.62	0.00	0.00	0.00	0.00	0.00	25.23	0.00
Health Net HMO (HN & HC) (4)											
Gross Rates	570.90	1,027.62	1,198.89	1,655.61	336.36	672.72	1,009.08	964.35	793.08	1,421.07	1,209.85
Employer Contribution	429.33	772.79	856.28	1,199.74	336.36	672.72	1,009.08	924.10	793.08	1,294.78	1,209.85
Net Cost	141.57	254.83	342.61	455.87	0.00	0.00	0.00	40.25	0.00	126.29	0.00
Kaiser Permanente - CA (KN & KS)											
Gross Rates	465.44	837.79	977.43	1,349.78	235.17	470.34	705.51	747.16	607.52	1,119.51	842.69
Employer Contribution	390.82	703.47	818.28	1,130.93	235.17	470.34	705.51	747.16	607.52	1,119.51	842.69
Net Cost	74.62	134.32	159.15	218.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Anthem Blue Cross PLUS (BC)											
Gross Rates	573.99	1,033.18	1,205.38	1,664.57	388.02	776.04	1,164.06	1,019.41	847.21	1,478.60	1,312.96
Employer Contribution	429.33	772.79	856.28	1,199.74	388.02	776.04	1,164.06	924.10	834.03	1,294.78	1,294.78
Net Cost	144.66	260.39	349.10	464.83	0.00	0.00	0.00	95.31	13.18	183.82	18.18
Anthem Blue Cross PPO (BP)											
Gross Rates	589.82	1,061.68	1,238.63	1,710.47	349.73	699.46	1,049.19	998.54	821.59	1,470.38	1,238.36
Employer Contribution	429.33	772.79	856.28	1,199.74	349.73	699.46	1,049.19	924.10	821.59	1,294.78	1,238.36
Net Cost	160.49	288.89	382.35	510.73	0.00	0.00	0.00	74.44	0.00	175.60	0.00
Western Health Advantage (WH)											
Gross Rates	458.62	825.51	963.10	1,330.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Employer Contribution	384.00	691.19	803.95	1,111.15	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Net Cost	74.62	134.32	159.15	218.85	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CORE Major Medical (CM)											
Gross Rates	70.70	127.26	148.47	205.03	150.81	301.62	452.43	228.58	207.37	285.14	358.18
Employer Contribution	70.70	127.26	148.47	205.03	150.81	301.62	452.43	228.58	207.37	285.14	358.18
Net Cost	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

APPENDIX B-2
Pay Band 3

UNIVERSITY OF CALIFORNIA
MONTHLY COST OF MEDICAL PLANS
FOR EMPLOYEES WITH FULL-TIME SALARY RATE OF \$93,001 TO \$140,000 AND ACTIVE EMPLOYEES WITH PRIMARY MEDICARE COVERAGE

1/1/2011-12/31/2011

MEDICAL PLAN	Non-Medicare			Medicare			Split-Medicare				
	U	UC	UA	UAC	M	MM	MMM	MA	MC	MAC	MMC
	Single	Adult plus Child(ren)	Two Adults	Family	Single	Two Party	Family	Two Adults	Adult plus Child(ren)	Family (1)	Family (2)
2011 GROSS/NET EMPLOYEE COST											
Kaiser Umbrella (KU)											
Gross Rates	611.12	1,100.02	1,283.35	1,772.25	236.95	473.90	710.85	909.18	725.85	1,398.08	962.80
Employer Contribution	429.33	772.79	856.28	1,199.74	236.95	473.90	710.85	909.18	725.85	1,294.78	962.80
Net Cost	181.79	327.23	427.07	572.51	0.00	0.00	0.00	0.00	0.00	103.30	0.00
Anthem Lumenos PPO with HRA (BL)											
Gross Rates	484.19	871.55	1,016.80	1,404.15	411.42	822.84	1,234.26	944.03	798.47	1,331.38	1,215.55
Employer Contribution	409.57	737.23	856.28	1,185.30	411.42	822.84	1,234.26	924.10	798.47	1,280.34	1,215.55
Net Cost	74.62	134.32	160.52	218.85	0.00	0.00	0.00	19.93	0.00	51.04	0.00

NOTES:

- (1) MAC = Split Medicare family with at least one Non-Medicare Adult
- (2) MMC = Split Medicare family with two Medicare Adults plus Child(ren)
- (3) Rates for EPO and rates for Medicare families in Seniority Plus and Medicare COB with non-Medicare members enrolled in Health Net Blue & Gold
- (4) Rates for Medicare families in Seniority Plus and Medicare COB with non-Medicare members enrolled in Health Net HMO

APPENDIX B-2
Pay Band 4

UNIVERSITY OF CALIFORNIA:
MONTHLY COST OF MEDICAL PLANS
FOR EMPLOYEES WITH FULL-TIME SALARY RATE OVER \$140,000 AND ACTIVE EMPLOYEES WITH PRIMARY MEDICARE COVERAGE

1/1/2011-12/31/2011

MEDICAL PLAN	Non-Medicare			Medicare			Split-Medicare				
	U	UC	UA	UAC	M	MM	MMM	MA	MC	MAC	MMC
	Single	Adult plus Child(ren)	Two Adults	Family	Single	Two Party	Family	Two Adults	Adult plus Child(ren)	Family (1)	Family (2)
2011 GROSS/NET EMPLOYEE COST											
Health Net Blue & Gold HMO (HB & HE) (3)											
Gross Rates	517.71	931.88	1,087.19	1,501.36	336.36	672.72	1,009.08	905.84	750.53	1,320.01	1,086.89
Employer Contribution	394.11	709.39	786.02	1,101.31	336.36	672.72	1,009.08	905.84	750.53	1,294.78	1,086.89
Net Cost	123.60	222.49	301.17	400.05	0.00	0.00	0.00	0.00	0.00	25.23	0.00
Health Net HMO (HN & HC) (4)											
Gross Rates	570.90	1,027.62	1,198.89	1,655.61	336.36	672.72	1,009.08	964.35	793.08	1,421.07	1,209.85
Employer Contribution	394.11	709.39	786.02	1,101.31	336.36	672.72	1,009.08	924.10	793.08	1,294.78	1,209.85
Net Cost	176.79	318.23	412.87	554.30	0.00	0.00	0.00	40.25	0.00	126.29	0.00
Kaiser Permanente - CA (KN & KS)											
Gross Rates	465.44	837.79	977.43	1,349.78	235.17	470.34	705.51	747.16	607.52	1,119.51	842.69
Employer Contribution	355.60	640.07	748.02	1,032.50	235.17	470.34	705.51	747.16	607.52	1,119.51	842.69
Net Cost	109.84	197.72	229.41	317.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Anthem Blue Cross PLUS (BC)											
Gross Rates	573.99	1,033.18	1,205.38	1,664.57	388.02	776.04	1,164.06	1,019.41	847.21	1,478.60	1,312.96
Employer Contribution	394.11	709.39	786.02	1,101.31	388.02	776.04	1,164.06	924.10	834.03	1,294.78	1,294.78
Net Cost	179.88	323.79	419.36	563.26	0.00	0.00	0.00	95.31	13.18	183.82	18.18
Anthem Blue Cross PPO (BP)											
Gross Rates	589.82	1,061.68	1,238.63	1,710.47	349.73	699.46	1,049.19	998.54	821.59	1,470.38	1,238.36
Employer Contribution	394.11	709.39	786.02	1,101.31	349.73	699.46	1,049.19	924.10	821.59	1,294.78	1,238.36
Net Cost	195.71	352.29	452.61	609.16	0.00	0.00	0.00	74.44	0.00	175.60	0.00
Western Health Advantage (WH)											
Gross Rates	458.62	825.51	963.10	1,330.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Employer Contribution	348.78	627.79	733.69	1,012.72	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Net Cost	109.84	197.72	229.41	317.28	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CORE Major Medical (CM)											
Gross Rates	70.70	127.26	148.47	205.03	150.81	301.62	452.43	228.58	207.37	285.14	358.18
Employer Contribution	70.70	127.26	148.47	205.03	150.81	301.62	452.43	228.58	207.37	285.14	358.18
Net Cost	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

APPENDIX B-2
Pay Band 4

UNIVERSITY OF CALIFORNIA:
MONTHLY COST OF MEDICAL PLANS
FOR EMPLOYEES WITH FULL-TIME SALARY RATE OVER \$140,000 AND ACTIVE EMPLOYEES WITH PRIMARY MEDICARE COVERAGE

1/1/2011-12/31/2011

MEDICAL PLAN	Non-Medicare			Medicare			Split-Medicare				
	U	UC	UA	UAC	M	MM	MMM	MA	MC	MAC	MMC
	Single	Child(ren)	Two Adults	Family	Single	Two Party	Family	Two Adults	Adult plus Child(ren)	Family (1)	Family (2)
2011 GROSS/NET EMPLOYEE COST											
Kaiser Umbrella (KU)											
Gross Rates	611.12	1,100.02	1,283.35	1,772.25	236.95	473.90	710.85	909.18	725.85	1,398.08	962.80
Employer Contribution	394.11	709.39	786.02	1,101.31	236.95	473.90	710.85	909.18	725.85	1,294.78	962.80
Net Cost	217.01	390.63	497.33	670.94	0.00	0.00	0.00	0.00	0.00	103.30	0.00
Anthem Lumenos PPO with HRA (BL)											
Gross Rates	484.19	871.55	1,016.80	1,404.15	411.42	822.84	1,234.26	944.03	798.47	1,331.38	1,215.55
Employer Contribution	374.35	673.83	786.02	1,086.87	411.42	822.84	1,234.26	924.10	798.47	1,280.34	1,215.55
Net Cost	109.84	197.72	230.78	317.28	0.00	0.00	0.00	19.93	0.00	51.04	0.00

NOTES:

- (1) MAC = Split Medicare family with at least one Non-Medicare Adult
- (2) MMC = Split Medicare family with two Medicare Adults plus Child(ren)
- (3) Rates for EPO and rates for Medicare families in Seniority Plus and Medicare COB with non-Medicare members enrolled in Health Net Blue & Gold
- (4) Rates for Medicare families in Seniority Plus and Medicare COB with non-Medicare members enrolled in Health Net HMO