



**Summary of Foundation Health Plan Cost  
Active Employees for Plan Year 2022**

<b>Kaiser</b>	<b>Monthly Premium</b>	<b>Employer Contribution</b>	<b>Your Monthly Cost</b>
Single	\$509.00	\$458.10	<b>\$50.90</b>
Two-Party	\$1,004.00	\$903.60	<b>\$100.40</b>
Family	\$1,299.00	\$1,169.10	<b>\$129.90</b>

<b>Anthem HMO 20</b>	<b>Monthly Premium</b>	<b>Employer Contribution</b>	<b>Your Monthly Cost</b>
Single	\$631.00	\$567.90	<b>\$63.10</b>
Two-Party	\$1,262.00	\$1,135.80	<b>\$126.20</b>
Family	\$1,787.00	\$1,608.30	<b>\$178.70</b>

<b>Anthem HMO Select 15</b>	<b>Monthly Premium</b>	<b>Employer Contribution</b>	<b>Your Monthly Cost</b>
Single	\$574.00	\$516.60	<b>\$57.40</b>
Two-Party	\$1,148.00	\$1,033.20	<b>\$114.80</b>
Family	\$1,625.00	\$1,462.50	<b>\$162.50</b>

<b>Anthem PPO</b>	<b>Monthly Premium</b>	<b>Employer Contribution</b>	<b>Your Monthly Cost</b>
Single	\$788.00	\$709.20	<b>\$78.80</b>
Two-Party	\$1,578.00	\$1,420.20	<b>\$157.80</b>
Family	\$2,232.00	\$2,008.80	<b>\$223.20</b>

\*Monthly medical costs are collected on a bi-weekly basis (twice a month). In the event there are three pay periods in a month, benefit deductions will only be collected from two of the three pay periods.