

[2012 Certification of “the Average Contribution” Under Ten-County Survey for six-month Plan Year starting July 1, 2012 and ending December 31, 2012]

CERTIFICATION TO THE BOARD OF SUPERVISORS, PURSUANT TO SECTION A8.423 OF APPENDIX A TO THE CITY CHARTER, OF “THE AVERAGE CONTRIBUTION” AS DETERMINED BY THE TEN-COUNTY SURVEY REQUIRED UNDER SUCH CHARTER SECTION.

WHEREAS, Pursuant to Section A8.423 of Appendix A to the City Charter, the Health Service Board (the “Board”) is required to conduct a survey of the ten counties in the State of California, other than the City and County of San Francisco, having the largest populations to determine the average contribution made by each such county toward the providing of health care plans, exclusive of dental or optical care, for each employee of such county; and

WHEREAS, Pursuant to such Charter Section, the Board is required to certify to the Board of Supervisors “the average contribution” (as such term is defined in such Charter Section) as determined by such survey; and

WHEREAS, According to the State of California Department of Finance, the ten most populous counties in the State of California other than San Francisco (in descending order of population) are: Los Angeles, San Diego, Orange, Riverside, San Bernardino, Santa Clara, Alameda, Sacramento, Contra Costa and Fresno (collectively, the “Survey Counties”); and

WHEREAS, Under the survey of each of the Survey Counties which was completed on January 12, 2012 (a copy of which is attached as Exhibit A hereto and made a part hereof), the Board has determined that “the average contribution” is the sum of **five hundred twenty-two dollars and ninety-seven cents (\$522.97)**; and

WHEREAS, The Board desires to certify “the average contribution” to the Board of Supervisors as required under Section A8.423 of Appendix A to the City Charter; now, therefore, be it

RESOLVED, That the Board hereby certifies to the Board of Supervisors that (a) the Board has conducted and completed as of January 12, 2012, a survey of the Survey Counties as required under Section A8.423 of Appendix A to the City Charter; and (b) “the average contribution” (as such term is defined in such Charter Section) determined under such survey is the sum of **five hundred twenty-two dollars and ninety-seven cents (\$522.97)**; and, be it

FURTHER RESOLVED, That the Board hereby authorizes the Director of the Health Service System, to provide to or to execute and deliver to the Board of Supervisors, on behalf of the Board, such further information, certificates, assurances or other documents as the Board of Supervisors may require in connection with the current survey and certification required under Section A8.423 of Appendix A to the City Charter.

EXHIBIT A

Copy of Survey

The Process

The City Charter specifies that the City and County of San Francisco survey the 10 most populous counties in California and collect, for each county, the amount contributed by the employer for employee-only coverage under each of the county's medical plans. The survey includes contributions made for employees exclusive of any contributions made for employee's dependents.

We use the information gathered from the 10 county survey to compute an average increase in employer contributions for each county, and we then average the averages to arrive at the 10 county to compute an average increase in employer contributions for each county, and we then average the averages to arrive at the 10 county survey amount. The City is obligated by Charter to contribute the 10 county survey amount toward the cost of employees' medical benefits.

To help put the county contribution amounts into context, we also collect information on premium increases data on select plan design elements such as co-pays for office visits and emergency rooms, charges for hospital stays, prescriptions and deductibles.

The Results and Observations

The average monthly contribution of \$522.97 for FY 2012-13 is 3.78 percent above the amount of \$503.94 contributed by the employers toward health care plans in FY 2011-12. The 3.78 percent is the lowest we have seen in the last 10 years.

The number of plan choices offered by the Counties in the survey varies. At 18 offerings, Los Angeles provides members with the largest number of plan choices while San Bernardino offers only three, the least number of choices.

For FY 2012-13, several Counties dropped and added plan offerings. San Diego added the Blue Cross Full Access HMO. Santa Clara added the Kaiser Executive Management HMO. Alameda dropped their PacifiCare HMO \$5, Kaiser HMO \$5 and PacifiCare PPO \$5. Contra Costa dropped their Health Net EPO and added the Health Net HMO Plan B, the Health Net PPO Plan B, and the Kaiser HMO Plan B.

All counties offer multiple plans from the same healthcare vendor. Additionally, Alameda County no longer offers members a selection of plans from the same vendors based on \$5 and \$15 co-pays, they offer \$15 co-pay plans only.

While the purpose of the survey is to gather information on the employer contributions, we also collect premium data. In 2012-13, the average increase in premiums for the 10 counties surveyed was 8.7 percent. San Diego County experienced the greatest increase at 18.2 percent and Santa Clara with a -2 percent decrease had the lowest.

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

Average of Employer Contributions

Rank	County	2003-04	2004-05	2005-06	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13
1	Los Angeles	272.27	276.16	316.07	338.55	362.55	383.10	415.91	457.56	478.56	499.57
2	San Diego	207.95	262.38	267.86	363.48	305.87	327.00	363.48	364.00	406.00	432.20
3	Orange	383.50	395.83	374.13	380.63	387.92	338.64	372.44	383.75	434.41	485.10
4	Riverside	275.61	317.55	364.69	391.53	462.05	469.65	491.27	488.44	513.02	537.43
5	San Bernardino	242.53	298.45	333.57	299.72	313.73	368.67	377.35	397.51	399.70	398.98
6	Santa Clara	288.18	342.10	382.32	438.49	479.93	515.52	563.19	608.44	655.97	643.13
7	Alameda	265.38	276.28	316.40	342.11	398.35	440.58	497.76	521.89	541.06	575.00
8	Sacramento	308.98	315.25	363.89	422.13	480.54	480.76	516.78	561.35	637.98	667.02
9	Contra Costa	267.55	299.35	336.62	366.77	407.86	438.47	470.02	495.15	521.90	540.43
10	Fresno	300.16	345.67	399.71	390.06	432.64	425.58	425.43	450.43	450.80	450.80
	Average	281.21	312.90	345.53	373.35	403.14	418.80	449.37	472.85	503.94	522.97

Increase Over Prior Year

Rank	County	2003-04	2004-05	2005-06	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13
1	Los Angeles	8.49%	1.43%	14.45%	7.11%	7.09%	5.67%	8.57%	10.01%	4.60%	4.39%
2	San Diego	15.55%	26.17%	2.09%	35.70%	-15.85%	6.91%	11.16%	0.14%	11.50%	6.45%
3	Orange	-1.89%	3.22%	-5.48%	1.74%	1.92%	-12.70%	9.98%	3.04%	13.20%	11.67%
4	Riverside	23.19%	15.22%	14.84%	7.36%	18.01%	1.65%	4.60%	-0.57%	5.00%	4.76%
5	San Bernardino	8.59%	23.06%	11.77%	-10.15%	4.67%	17.51%	2.35%	5.34%	0.60%	-0.18%
6	Santa Clara	21.73%	18.71%	11.76%	14.69%	9.45%	7.42%	9.25%	8.04%	7.80%	-1.96%
7	Alameda	21.57%	4.11%	14.52%	8.13%	16.44%	10.60%	12.98%	4.85%	3.70%	6.27%
8	Sacramento	18.91%	2.03%	15.43%	16.00%	13.84%	0.05%	7.49%	8.62%	13.70%	4.55%
9	Contra Costa	27.50%	11.89%	12.45%	8.96%	11.20%	7.51%	7.20%	5.35%	5.40%	3.55%
10	Fresno	9.81%	15.16%	15.63%	-2.41%	10.92%	-1.63%	-0.03%	5.87%	0.10%	0.00%
	Average	13.99%	11.27%	10.43%	8.05%	7.98%	3.88%	7.30%	5.23%	6.57%	3.78%

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

1. Los Angeles County:

Population: 9,827,070

Medical Plans	2011-12 Premium	2012-13 Premium	% +/-	2011-12 County Contribution	2012-13 County Contribution	% +/-
Kaiser Choices HMO - County Sponsored	515.01	552.53	7.3%	515.01	552.53	7.3%
CIGNA Choices HMO - County Sponsored	485.55	520.65	7.2%	485.55	520.65	7.2%
CIGNA Choices POS - County Sponsored	871.24	934.94	7.3%	614.86	659.13	7.2%
Blue Cross Prudent Buyer Basic- ALADS	687.63	743.92	8.2%	614.86	659.13	7.2%
Blue Cross CaliforniaCare Basic- ALADS	459.71	502.21	9.2%	459.71	502.21	9.2%
Blue Cross Prudent Buyer Premier- ALADS	780.50	843.48	8.1%	614.86	659.13	7.2%
Blue Cross CaliforniaCare Premier - ALADS	552.58	601.77	8.9%	552.58	601.77	8.9%
Blue Shield Classic CAPE	703.00	721.00	2.6%	614.86	659.13	7.2%
Blue Shield Lite CAPE	421.00	443.00	5.2%	421.00	443.00	5.2%
Local 1014 Plan - Fire Fighters	583.00	613.00	5.1%	583.00	613.00	5.1%
Kaiser Options - SEIU	488.04	527.91	8.2%	488.04	527.91	8.2%
Kaiser HMO - Unrepresented	255.00	231.00	-9.4%	255.00	231.00	-9.4%
Blue Cross CaliforniaCare HMO - Unrepresented	255.00	231.00	-9.4%	255.00	231.00	-9.4%
Blue Cross Plus POS - Unrepresented	381.00	349.00	-8.4%	381.00	349.00	-8.4%
Blue Cross Catastrophic - Unrepresented	197.00	179.00	-9.1%	197.00	179.00	-9.1%
Blue Cross Prudent Buyer PPO - Unrepresented	491.00	446.00	-9.2%	491.00	446.00	-9.2%
PacifiCare Options HMO - SEIU	455.87	499.61	9.6%	455.87	499.61	9.6%
UnitedHealthcare Options PPO - SEIU	943.46	1,085.87	15.1%	614.86	659.13	7.2%
AVERAGE	529.20	556.99	5.3%	478.56	499.57	4.4%

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

1. Los Angeles County: Medical Plan Design Summary

Blue Shield Lite	HMO	In	Out
Deductible	None	\$500/\$1,000	\$500/\$1,000
Physicians Services	\$10 Copay	\$25 Copay	60/40 After Ded
Emergency Room	\$50 Copay	\$50 Copay	\$50 Copay
Rx	\$5/\$15/\$30	\$5/\$15/\$30	Not Covered
Hospital	No Charge	80/20 After Ded	60/40 After Ded
Blue Shield Classic	HMO	In	Out
Deductible	None	\$300/\$600	\$300/\$600
Physicians Services	\$10 Copay	\$20 Copay	60/40 After Ded
Emergency Room	\$50 Copay	\$50 Copay	\$50 Copay
Rx	\$5/\$15/\$30	\$5/\$15/\$30	Not Covered
Hospital	No Charge	90/10 After Ded	60/40 After Ded
PacifiCare	HMO		
Deductible	None		
Physicians Services	\$10 Copay		
Emergency Room	\$50 Copay		
Rx	\$5/\$20		
Hospital	No Charge		
UnitedHealthcare		PPO - In	PPO - Out
Deductible		\$300/\$1,500	\$1,500/\$3,000
Physicians Services		20% Copay	50% Copay After Ded
Emergency Room		20% Copay After Ded	50% Copay After Ded
Rx		\$5/\$20/\$35	Not Covered
Hospital		20% Copay After Ded	50% Copay After Ded
Kaiser	Options HMO	Choices HMO	Unrep HMO
Deductible	None	None	None
Physicians Services	\$10 Copay	\$10 Copay	\$15 Copay
Emergency Room	\$50 Copay	\$50 Copay	\$50 Copay
Rx	\$5/\$20	\$5	\$10/\$20
Hospital	No Charge	No Charge	No Charge

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

1. Los Angeles County: Medical Plan Design Summary

CIGNA	HMO	POS - In	POS - Out
Deductible	None	None	\$500/\$1,000
Physicians Services	\$10 Copay	\$10 Copay	60/40 After Ded
Emergency Room	\$50 Copay	\$50 Copay	60/40 After Ded
Rx	\$5/\$20	\$5/\$20	60/40 After Ded
Hospital	No Charge	\$50 Copay/Day	60/40 After Ded + \$1,000/Admit
Blue Cross California Care HMO	ALADS	Unrep	
Deductible	None	None	
Physicians Services	\$5 Copay	\$15 Copay	
Emergency Room	\$25 Copay	\$50 Copay	
Rx	\$5/\$10	\$10/\$20	
Hospital	No Charge	No Charge	
Blue Cross Plus POS	HMO	In	Out
Deductible	None	None	\$400/\$800
Physicians Services	\$15 Copay	\$25 Copay	70/30 After Ded
Emergency Room	\$50 Copay	\$50 Copay	\$50 Copay
Rx	\$10/\$20	\$10/\$20	\$10/\$20
Hospital	No Charge	80/20	70/30 + \$500/Admit
Local 1014 Plan	HMO		
Deductible	\$200/\$600		
Physicians Services	90/10 After Ded		
Emergency Room	\$50 Copay		
Rx	\$10/\$20/\$30+		
Hospital	90/10 After Ded		
Blue Cross	Catastrophic		
Deductible	\$2,000/\$4,000		
Physicians Services	75/25 After Ded		
Emergency Room	\$100 Copay		
Rx	\$200 Ded Then 75/25		
Hospital	75/25 After Ded +\$500/Admit		

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

1. Los Angeles County: Medical Plan Design Summary

Blue Cross Prudent Buyer PPO	ALADS - In	ALADS - Out	Unrep - In
Deductible	\$200/\$600	\$200/\$600	\$150/\$450
Physician Services	90/10 After Ded	70/30 After Ded	\$15 Copay
Emergency Room	90/10 After Ded	70/30 After Ded	\$50 Copay Then 90/10
Rx	\$5/\$10	\$5/\$10+	\$10/\$20
Hospital	90/10 After Ded	70/30 After Ded	90/10

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

2. San Diego County:

Population: 3,104,581

Medical Plans	2011-12 Premium	2012-13 Premium	% +/-	2011-12 County Contribution	2012-13 County Contribution	% +/-
Kaiser HMO	398.00	418.04	5.0%	398.00	418.04	5.0%
Anthem - Blue Cross PPO	550.16	620.64	12.8%	410.00	436.92	6.6%
Anthem - Blue Cross Select HMO	474.58	498.12	5.0%	410.00	436.92	6.6%
Anthem - Blue Cross Full Access HMO *	-	705.06	-	-	436.92	-
AVERAGE	474.25	560.47	18.2%	406.00	432.20	6.5%

2. San Diego County: Medical Plan Design Summary

Kaiser HMO			
Deductible	None		
Physicians Services	\$25 Copay		
Emergency Room	\$125 Copay		
Rx	\$10/\$25		
Hospital	\$100 Copay Per Admit		
Anthem - Blue Cross		Select HMO	Full Access HMO
Deductible	None		None
Physicians Services	\$25 Copay		\$30 Copay
Emergency Room	\$125 Copay		\$125 Copay
Rx	\$10/\$20/\$35		\$10/\$20/\$35
Hospital	\$200 Copay Per Admit		\$200 Copay Per Admit
Anthem - Blue Cross		PPO - In	Out
Deductible	\$300/\$600		\$600/\$1,200
Physicians Services	\$20 Copay		40% After Ded
Emergency Room	\$75 Copay then 20%		\$75 Copay then 20%
Rx	\$10/\$20/\$35		\$10/\$20/\$35
Hospital	\$150 Copay then 20%		\$300 Copay then 40%

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

3. Orange County:

Population: 3,017,089

Medical Plans	2011-12 Premium	2012-13 Premium	% +/-	2011-12 County Contribution	2012-13 County Contribution	% +/-
Premiere Wellwise PPO*	625.37	730.43	16.8%	597.24	697.05	16.7%
Premiere Sharewell PPO*	250.15	292.18	16.8%	319.18	361.21	13.2%
CIGNA HMO	461.53	507.46	10.0%	438.46	482.09	10.0%
Kaiser HMO	402.91	421.08	4.5%	382.77	400.03	4.5%
AVERAGE	434.99	487.79	12.1%	434.41	485.10	11.7%

3. Orange County: Medical Plan Design Summary

	In	Out
Wellwise PPO		
Deductible	\$300/\$600	\$500/\$1,000
Physicians Services	90/10	70/30
Emergency Room	90/10	70/30
Rx	\$20/\$25/\$30	\$20/\$25/\$30
Hospital	90/10	70/30
Sharewell PPO		
Deductible	\$5,000 Per Family	\$5,000 Per Family
Physicians Services	90/10	80/20
Emergency Room	90/10	80/20
Rx	20%	20%
Hospital	90/10	80/20
CIGNA		
	HMO	
Deductible	None	
Physicians Services	\$15 Copay	
Emergency Room	\$50 Copay	
Rx	\$10/\$20/\$40	
Hospital	\$100 Per Admit	
Kaiser		
	HMO	
Deductible	None	
Physicians Services	\$15 Copay	
Emergency Room	\$50 Copay	
Rx	\$10/\$20	
Hospital	\$100 Per Admit	

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

4. Riverside County:

Population: 2,191,800

Medical Plans	2011-12 Premium	2012-13 Premium	% +/-	2011-12 County Contribution	2012-13 County Contribution	% +/-
Health Net EPO (1)	480.48	539.86	12.4%	480.48	539.86	12.4%
Kaiser HMO	463.50	524.50	13.2%	463.50	524.50	13.2%
Exclusive Care EPO	376.10	389.18	3.5%	376.10	389.18	3.5%
Health Net PPO (2)	671.98	774.08	15.2%	671.98	697.09	3.7%
Blue Shield HMO - PERS	567.88	583.60	2.8%	567.88	583.60	2.8%
Kaiser HMO - PERS	477.96	512.76	7.3%	477.96	512.76	7.3%
PERSCare	819.18	943.26	15.1%	621.95	633.95	1.9%
PERS Choice	516.28	526.20	1.9%	516.28	526.20	1.9%
PORAC - PERS	527.00	556.00	5.5%	527.00	556.00	5.5%
Blue Shield HPN	488.62	501.94	2.7%	488.62	501.94	2.7%
PERS Select	451.48	446.68	-1.1%	451.48	446.68	-1.1%
AVERAGE	530.95	572.55	7.8%	513.02	537.43	4.8%

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

4. Riverside County: Medical Plan Design Summary

HealthNet	HMO	PPO - IN	PPO - OUT
Deductible	None	\$500/\$1,000	\$500/\$1,000
Physicians Services	\$15/\$30 Copay	\$20 Copay	60% Aft Ded
Emergency Room	\$100 Copay	80% After Ded	80% After Ded
Rx	\$10/\$25/\$50	\$5/\$15/\$45	\$5/\$15/\$45
Hospital	\$100 Copay	80/20 After ded	60/40 After ded
KAISER HMO			
Deductible	None		
Physicians Services	\$15 Copay		
Emergency Room	\$50 Copay		
Rx	\$10/\$25		
Hospital	\$100 Copay		
EXCLUSIVE CARE EPO			
Deductible	None		
Physicians Services	\$5 Copay		
Emergency Room	\$100/\$250 Copay		
Rx	\$5/\$15/\$25		
Hospital	No Charge		

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

5. San Bernardino County:

Population: 2,038,771

Medical Plans	2011-12 Premium	2012-13 Premium	% +/-	2011-12 County Contribution	2012-13 County Contribution	% +/-
Kaiser HMO	451.90	520.20	15.1%	405.22	410.62	1.3%
Health Net Elect Open Access HMO	401.77	441.35	9.9%	388.67	375.70	-3.3%
Health Net PPO	812.11	892.32	9.9%	405.22	410.62	1.3%
AVERAGE	555.26	617.96	11.3%	399.70	398.98	-0.2%

Note: 2012-2013 premiums and contributions were not available. Shown above are 2010-11 and 2011-12 data.

5. San Bernardino County: Medical Plan Design Summary

Kaiser	HMO		
Deductible	None		
Physicians Services	\$10 Copay		
Emergency Room	\$50 Copay		
Rx	\$10/\$15		
Hospital	No Charge		
HEALTH NET OPEN ACCESS	TIER 1 - HMO	TIER 2 - PPO	
Deductible	None	None	
Physicians Services	\$10 Copay	\$30 Copay	
Emergency Room	\$50 Copay	Not Covered	
Rx	\$5/\$10/\$25	\$5/\$10/\$25	
Hospital	No Charge	Not Covered	
HEALTH NET PPO	IN	OUT	
Deductible	\$250/\$750	\$250/\$750	
Physicians Services	80/20	70/30	
Emergency Room	\$50 Deductible plus 20% After Ded	\$50 Deductible plus 20% After Ded	
Rx	\$15/\$30/\$30	\$15/\$30/\$30	
Hospital	80/20 After ded	\$250/Admission plus 70/30 After ded	

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

6. Santa Clara County:

Population: 1,787,553

Medical Plans	2011-12 Premium	2012-13 Premium	% +/-	2011-12 County Contribution	2012-13 County Contribution	% +/-
Kaiser HMO	559.28	588.58	5.2%	559.28	588.58	5.2%
Kaiser HMO Exec Mgmt	-	568.36		-	568.36	
Valley Health HMO	559.28	559.28	0.0%	559.28	559.28	0.0%
Health Net POS	849.36	856.31	0.8%	849.36	856.31	0.8%
AVERAGE	655.97	643.13	-2.0%	655.97	643.13	-2.0%

6. Santa Clara County: Medical Plan Design Summary

Kaiser	HMO	Exec Mgmt HMO	
Deductible	None	None	
Physicians Services	\$5 Copay	\$15 Copay	
Emergency Room	\$5 Copay	\$50 Copay	
Rx	\$5	\$5/\$20	
Hospital	No Charge	N/A	
Valley Health	HMO		
Deductible	None		
Physicians Services	No Charge		
Emergency Room	No Charge		
Rx	No Charge		
Hospital	No Charge		
HealthNet POS	HMO	PPO	OUT
Deductible	None	None	\$200/PMPY
Physicians Services	\$5 Copay	\$10 Copay	70/30
Emergency Room	\$35 Copay	90/10	70/30
Rx	\$5/\$10/\$20	\$5/\$10/\$20	\$5/\$10/\$20
Hospital	No Charge	90/10	70/30

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

7. Alameda County:

Population: 1,513,493

Medical Plans	2011-12 Premium	2012-13 Premium	% +/-	2011-12 County Contribution	2012-13 County Contribution	% +/-
Pacificare HMO (\$5)	750.58	-		573.56	-	
Kaiser HMO (\$5)	573.56	-		573.56	-	
Pacificare PPO (\$5)	1,867.50	-		573.56	-	
UnitedHealthcare HMO (\$15)	699.68	827.84	18.3%	524.82	563.52	7.4%
Kaiser HMO (\$15)	524.82	563.52	7.4%	524.82	563.52	7.4%
UnitedHealthcare PPO	1,867.50	1,994.48	6.8%	524.82	563.52	7.4%
UnitedHealthcare HMO (\$15)	699.68	827.84	18.3%	629.72	745.06	18.3%
Kaiser HMO (\$15)	524.82	563.52	7.4%	472.34	507.18	7.4%
UnitedHealthcare PPO	1,867.50	1,994.48	6.8%	472.34	507.18	7.4%
AVERAGE	1,041.74	1,128.61	8.3%	541.06	575.00	6.3%

Pacificare HMO, Kaiser HMO, and Pacificare PPO were discontinued 2012-13

7. Alameda County: Medical Plan Design Summary

United Healthcare	PPO	HMO -\$15
Deductible	\$2,000/\$4,000	NONE
Physicians Services	\$25 COPAY	\$15 COPAY
Emergency Room	\$250 COPAY	\$50 COPAY
Rx	\$10/\$30/\$50	\$10/\$25/\$35
Hospital	\$100 COPAY	NO CHARGE
Kaiser	HMO -\$15	
Deductible	NONE	
Physicians Services	\$15 COPAY	
Emergency Room	\$50 COPAY	
Rx	\$15/\$15	
Hospital	NO CHARGE	

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

8. Sacramento County:

Population: 1,420,447

Medical Plans	2011-12 Premium	2012-13 Premium	% +/-	2011-12 County Contribution	2012-13 County Contribution	% +/-
Blue Shield HMO 15	853.26	853.26	0.0%	826.90	826.90	0.0%
Health Net HMO 15	643.02	725.96	12.9%	643.02	725.96	12.9%
Kaiser HMO 15	561.54	596.34	6.2%	561.54	596.34	6.2%
Blue Shield HDHP PPO	715.82	715.82	0.0%	715.82	715.82	0.0%
Kaiser HDHP HMO	442.62	470.06	6.2%	442.62	470.06	6.2%
AVERAGE	643.25	672.29	4.5%	637.98	667.02	4.6%

8. Sacramento County: Medical Plan Design Summary

Blue Shield	HMO	HDHP - PPO - In	HDHP - PPO - Out
Deductible	None	\$1,500/\$3,000	\$1,500/\$3,000
Physicians Services	\$15 Copay	80/20	60/40
Emergency Room	\$50 Copay	80/20	80/20
Rx	\$10/\$20/\$35	\$10/\$25/\$40	\$10/\$25/\$40 + 25%
Hospital	No Charge	80/20	60/40
HealthNet	HMO		
Deductible	None		
Physicians Services	\$15 Copay		
Emergency Room	\$35 Copay		
Rx	\$10/\$20/\$35		
Hospital	No Charge		
Kaiser	HMO	HDHP - HMO	
Deductible	None	\$1,500/\$3,000	
Physicians Services	\$15 Copay	No Charge After Ded	
Emergency Room	\$35 Copay	No Charge After Ded	
Rx	\$10/\$20	No Charge After Ded	
Hospital	No Charge	No Charge After Ded	

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

9. Contra Costa County:

Population: 1,052,192

Medical Plans	2011-12 Premium	2012-13 Premium	% +/-	2011-12 County Contribution	2012-13 County Contribution	% +/-
CCHP Plan A	558.22	586.13	5.0%	529.94	542.17	2.3%
CCHP Plan B	618.80	649.74	5.0%	541.21	556.64	2.9%
Health Net HMO Plan A	814.85	894.87	9.8%	616.62	671.85	9.0%
Health Net HMO Plan B ¹	-	812.00	-	-	627.79	-
Health Net EPO ²	814.85	-	-	616.62	-	-
Health Net PPO Plan A	1,067.02	1,109.51	4.0%	581.61	615.23	5.8%
Health Net PPO Plan B ¹	-	1,007.65	-	-	604.60	-
Kaiser HMO Plan A	638.41	673.87	5.6%	480.55	509.01	5.9%
Kaiser HMO Plan B ¹	-	608.09	-	-	478.91	-
Blue Shield HMO - PERS	642.33	674.01	4.9%	495.02	524.06	5.9%
CCHP Plan A Alternate - PERS	659.30	692.27	5.0%	495.02	496.10	0.2%
Kaiser HMO - PERS	546.75	586.57	7.3%	495.02	501.83	1.4%
PERS Care	862.73	993.34	15.1%	495.02	531.65	7.4%
PERS Choice	543.72	554.13	1.9%	495.02	506.88	2.4%
PORAC - PERS	527.00	556.00	5.5%	495.02	497.40	0.5%
PERS Select	475.48	470.39	-1.1%	474.93	474.69	-0.1%
Blue Shield HMO NetValue - PE	561.34	582.34	3.7%	495.02	508.09	2.6%
AVERAGE	666.49	715.68	7.4%	521.90	540.43	3.5%

¹ New Plan in 2012-13

² Health Net EPO was discontinued in 2012-13.

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

9. Contra Costa County: Medical Plan Design Summary

CCHP	PLAN A	PLAN B			
Deductible	None	None			
Physicians SErvices	No Charge	\$5 Copay			
Emergency Room	No Charge	\$20 Copay			
Rx	No Charge	\$3 Per Rx			
Hospital	No Charge	No Charge			
HealthNet HMO	HMO	PLAN A -In	PLAN A - Out	PLAN B - In	PLAN B - OUT
Deductible	None	\$250/\$750	\$250/\$750	\$500/\$1,000	\$500/\$1,000
Physicians SErvices	\$10 Copay	\$10 Copay	70/30	\$20 Copay	60/40
Emergency Room	\$25 Copay	90/10	70/30	80/20	60/40
Rx	\$10/\$20/\$35	\$5	\$5	\$10/\$20/\$35	\$10/\$20/\$35
Hospital	No Charge	90/10	70/30	80/20	60/40; \$600 Max Per Day
Kaiser	PLAN A	PLAN B			
Deductible	None	\$500/\$1,000			
Physicians SErvices	\$10 Copay	\$20 Copay			
Emergency Room	\$10 Copay	90/10 After Ded			
Rx	\$10/\$20	\$10/\$30			
Hospital	No Charge	90/10 After Ded			

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

10. Fresno County:

Population: 933,075

Medical Plans	2011-12 Premium	2012-13 Premium	% +/-	2011-12 County Contribution	2012-13 County Contribution	% +/-
Kaiser \$15 HMO	731.45	865.15	18.3%	450.80	450.80	0.0%
Blue Cross HMO	576.51	591.72	2.6%	450.80	450.80	0.0%
Blue Cross PPO	798.33	823.62	3.2%	450.80	450.80	0.0%
Blue Cross HDPPO	465.68	471.23	1.2%	450.80	450.80	0.0%
AVERAGE	642.99	687.93	7.0%	450.80	450.80	0.0%

10. Fresno County: Medical Plan Design Summary

Kaiser	HMO		
Deductible	None		
Physicians Services	\$15 per visit		
Emergency Room	\$100 per visit		
Rx	\$10/\$20		
Hospital	No Charge		
BLUE CROSS	HMO	PPO	
Deductible	None	\$250/\$500	
Physicians Services	\$15 per visit	\$20 per visit	
Emergency Room	\$100 per visit	\$100 deductible	
Rx	\$10/\$20/\$35	\$10/\$20/\$35	
Hospital	No Charge	No Charge	
BLUE CROSS	HDPPO - IN	HDPPO - OUT	
Deductible	\$3,000/\$6,000	\$5,000/\$10,000	
Physicians Services	\$0 Copay	50% After Ded	
Emergency Room	\$0 Copay After Ded	\$0 Copay After Ded	
Rx	\$0 Copay	50/50	
Hospital	No Charge	No Charge	

Health Service System

CITY & COUNTY OF SAN FRANCISCO

2012-2013 TEN COUNTY SURVEY

2012 CalPERS

	Kaiser HMO	Blue Shield Access + HMO	Blue Shield NetValue HMO	PERS Select IN OUT		PERS Choice IN OUT		PERS Care IN OUT	
Annual Deductible	N/A	N/A	N/A	\$500/\$1,000		\$500/\$1,000		\$500/\$1,000	
Hospital (Inpatient)	No Charge	No Charge	No Charge	80%/20%	60%/40%	80%/20%	60%/40%	90%/10%	60%/40%, \$250
Emergency Room	\$50 Copay Waived if Admitted	\$50 Copay Waived if Admitted	\$50 Copay Waived if Admitted	80%/20%, \$50 Deductible		80%/20%, \$50 Deductible		90%/10%, \$50 Deductible	
Ambulance Services	No Charge	No Charge	No Charge	80%/20%		80%/20%		80%/20%	
Office Visits	\$15 Copay	\$15 Copay	\$15 Copay	\$20 Copay	60%/40%	\$20 Copay	60%/40%	\$20 Copay	60%/40%
Urgent Care	\$15 Copay	\$15 Copay	\$15 Copay	\$20 Copay	60%/40%	\$20 Copay	60%/40%	\$20 Copay	60%/40%
Rx - Retail	\$5/\$20	\$5/\$20/\$50	\$5/\$20/\$50	\$5/\$20/\$50		\$5/\$20/\$50		\$5/\$20/\$50	
Rx - Mail Order	\$5/\$20	\$10/\$40/\$100	\$10/\$40/\$100	\$10/\$40/\$100		\$10/\$40/\$100		\$10/\$40/\$100	
Infertility Treatment	50%/50%	50%/50%	50%/50%	Not Covered		Not Covered		Not Covered	
Acupuncture	\$15 Copay	Not Covered	Not Covered	80%/20%	60%/40% Limit 15 Visits/Yr	80%/20%	60%/40% Limit 15 Visits/Yr	90%/10%	60%/40% Limit 20 Visits/Yr
Chiropractic	Not Covered	Not Covered	Not Covered	80%/20%	60%/40% Limit 15 Visits/Yr	80%/20%	60%/40% Limit 15 Visits/Yr	90%/10%	60%/40% Limit 20 Visits/Yr

CERTIFICATION

I hereby certify that I perform the functions of the Secretary of the Health Service Board, and that the above Resolution was duly adopted and approved by the Health Service Board at a properly noticed meeting on January 12, 2012.

Laini K. Scott