

Local 18- Health & Welfare
Anthem Blue Cross Medical & Guardian Dental Rates 2024/2025
Effective July 1, 2024

DWP Monthly Medical Subsidy \$2,457.36

Anthem Blue Cross HMO Medical w/Body Scan Benefit	Premium	Monthly Full-time/Active Member Cost
Single	\$1,900.28	\$0.00
Two Party	\$2,224.57	\$0.00
Family	\$2,457.36	\$0.00

Anthem Blue Cross PPO Medical w/Body Scan Benefit

Single	\$2,131.08	\$0.00
Two Party	\$2,481.39	\$24.03
Family	\$3,077.99	\$620.63

Anthem Blue Cross Owens Valley PPO Medical w/Body Scan Benefit

Single	\$2,237.53	\$0.00
Two Party	\$4,674.93	\$0.00
Family	\$5,799.31	\$0.00

DWP Monthly Dental Subsidy \$135.86

Guardian DHMO Dental		Monthly Full-time/Active Member Cost
Single	\$112.97	\$0.00
Two Party	\$112.97	\$0.00
Family	\$112.97	\$0.00

Guardian PPO Dental		Member Cost
Single	\$135.86	\$0.00
Two Party	\$135.86	\$0.00
Family	\$135.86	\$0.00