

2017 CalPERS HEALTH BENEFITS PROGRAM

Basic Plan Rates

HEALTH PLAN	Enrolled Employee & Eligible Dependents	Plan Number	2017 Total Monthly Premium	All Employee Groups (except Unit 6)			Unit 6		
				2017 Amount Paid by CSU	2017 Amount Paid by Employee	2016 Amount Paid by Employee	2017 Amount Paid by CSU	2017 Amount Paid by Employee	2016 Amount Paid by Employee
Anthem Blue Cross Select HMO California	Employee Only	181	\$740.23	\$707.00	\$33.23	\$0.00	\$712.00	\$28.23	\$0.00
	Employee + 1		\$1,480.46	\$1,349.00	\$131.46	\$48.54	\$1,359.00	\$121.46	\$38.54
	Employee + 2 or more		\$1,924.60	\$1,727.00	\$197.60	\$82.00	\$1,747.00	\$177.60	\$62.00
Anthem Blue Cross Traditional HMO California	Employee Only	180	\$872.91	\$707.00	\$165.91	\$47.48	\$712.00	\$160.91	\$42.48
	Employee + 1		\$1,745.82	\$1,349.00	\$396.82	\$161.96	\$1,359.00	\$386.82	\$151.96
	Employee + 2 or more		\$2,269.57	\$1,727.00	\$542.57	\$229.45	\$1,747.00	\$522.57	\$209.45
Anthem Blue Cross EPO California <small>(Restricted to Del Norte County)</small>	Employee Only	172	\$740.88	\$707.00	\$33.88	\$10.70	\$712.00	\$28.88	\$5.70
	Employee + 1		\$1,481.76	\$1,349.00	\$132.76	\$88.40	\$1,359.00	\$122.76	\$78.40
	Employee + 2 or more		\$1,926.29	\$1,727.00	\$199.29	\$133.82	\$1,747.00	\$179.29	\$113.82
Anthem Blue Cross EPO California <small>(Restricted to Monterey County)</small>	Employee Only	127	\$740.88	\$707.00	\$33.88	\$10.70	\$712.00	\$28.88	\$5.70
	Employee + 1		\$1,481.76	\$1,349.00	\$132.76	\$88.40	\$1,359.00	\$122.76	\$78.40
	Employee + 2 or more		\$1,926.29	\$1,727.00	\$199.29	\$133.82	\$1,747.00	\$179.29	\$113.82
Blue Shield Access+ California	Employee Only	141	\$830.44	\$707.00	\$123.44	\$62.45	\$712.00	\$118.44	\$57.45
	Employee + 1		\$1,660.88	\$1,349.00	\$311.88	\$191.90	\$1,359.00	\$301.88	\$181.90
	Employee + 2 or more		\$2,159.14	\$1,727.00	\$432.14	\$268.37	\$1,747.00	\$412.14	\$248.37
Blue Shield Access+ EPO California <small>(Restricted to Colusa, Mendocino & Sierra Counties)</small>	Employee Only	191	\$830.44	\$707.00	\$123.44	\$62.45	\$712.00	\$118.44	\$57.45
	Employee + 1		\$1,660.88	\$1,349.00	\$311.88	\$191.90	\$1,359.00	\$301.88	\$181.90
	Employee + 2 or more		\$2,159.14	\$1,727.00	\$432.14	\$268.37	\$1,747.00	\$412.14	\$248.37
Health Net Salud Y Mas California	Employee Only	184	\$475.46	\$475.46	\$0.00	\$0.00	\$475.46	\$0.00	\$0.00
	Employee + 1		\$950.92	\$950.92	\$0.00	\$0.00	\$950.92	\$0.00	\$0.00
	Employee + 2 or more		\$1,236.20	\$1,236.20	\$0.00	\$0.00	\$1,236.20	\$0.00	\$0.00
Health Net Smartcare California	Employee Only	185	\$692.89	\$692.89	\$0.00	\$0.00	\$692.89	\$0.00	\$0.00
	Employee + 1		\$1,385.78	\$1,349.00	\$36.78	\$0.00	\$1,359.00	\$26.78	\$0.00
	Employee + 2 or more		\$1,801.51	\$1,727.00	\$74.51	\$0.00	\$1,747.00	\$54.51	\$0.00
Kaiser Permanente California	Employee Only	056	\$662.92	\$662.92	\$0.00	\$0.00	\$662.92	\$0.00	\$0.00
	Employee + 1		\$1,325.84	\$1,325.84	\$0.00	\$0.00	\$1,325.84	\$0.00	\$0.00
	Employee + 2 or more		\$1,723.59	\$1,723.59	\$0.00	\$0.00	\$1,723.59	\$0.00	\$0.00

2017 CalPERS HEALTH BENEFITS PROGRAM

Basic Plan Rates

HEALTH PLAN	Enrolled Employee & Eligible Dependents	Plan Number	2017 Total Monthly Premium	All Employee Groups (except Unit 6)			Unit 6		
				2017 Amount Paid by CSU	2017 Amount Paid by Employee	2016 Amount Paid by Employee	2017 Amount Paid by CSU	2017 Amount Paid by Employee	2016 Amount Paid by Employee
Kaiser Permanente - Out Of State	Employee Only	Codes vary by region	\$940.67	\$707.00	\$233.67	\$225.29	\$712.00	\$228.67	\$220.29
	Employee + 1		\$1,881.34	\$1,349.00	\$532.34	\$517.58	\$1,359.00	\$522.34	\$507.58
	Employee + 2 or more		\$2,445.74	\$1,727.00	\$718.74	\$691.75	\$1,747.00	\$698.74	\$671.75
PERSCare	Employee Only	278	\$826.37	\$707.00	\$119.37	\$96.58	\$712.00	\$114.37	\$91.58
	Employee + 1		\$1,652.74	\$1,349.00	\$303.74	\$260.16	\$1,359.00	\$293.74	\$250.16
	Employee + 2 or more		\$2,148.56	\$1,727.00	\$421.56	\$357.11	\$1,747.00	\$401.56	\$337.11
PERS Choice	Employee Only	222	\$740.88	\$707.00	\$33.88	\$10.70	\$712.00	\$28.88	\$5.70
	Employee + 1		\$1,481.76	\$1,349.00	\$132.76	\$88.40	\$1,359.00	\$122.76	\$78.40
	Employee + 2 or more		\$1,926.29	\$1,727.00	\$199.29	\$133.82	\$1,747.00	\$179.29	\$113.82
PERS Select California	Employee Only	045	\$673.25	\$673.25	\$0.00	\$0.00	\$673.25	\$0.00	\$0.00
	Employee + 1		\$1,346.50	\$1,346.50	\$0.00	\$0.00	\$1,346.50	\$0.00	\$0.00
	Employee + 2 or more		\$1,750.45	\$1,727.00	\$23.45	\$0.00	\$1,747.00	\$3.45	\$0.00
Peace Officers Research Association of California (PORAC)*	Employee Only	207	\$699.00	\$699.00	\$0.00	\$0.00	N/A	N/A	N/A
	Employee + 1		\$1,467.00	\$1,349.00	\$118.00	\$56.00			
	Employee + 2 or more		\$1,876.00	\$1,727.00	\$149.00	\$62.00			
Sharp Performance Plus California (Restricted to San Diego County)	Employee Only	189	\$616.49	\$616.49	\$0.00	\$0.00	\$616.49	\$0.00	\$0.00
	Employee + 1		\$1,232.98	\$1,232.98	\$0.00	\$0.00	\$1,232.98	\$0.00	\$0.00
	Employee + 2 or more		\$1,602.87	\$1,602.87	\$0.00	\$0.00	\$1,602.87	\$0.00	\$0.00
Unitedhealthcare Alliance HMO California	Employee Only	187	\$686.17	\$686.17	\$0.00	\$0.00	\$686.17	\$0.00	\$0.00
	Employee + 1		\$1,372.34	\$1,349.00	\$23.34	\$0.00	\$1,359.00	\$13.34	\$0.00
	Employee + 2 or more		\$1,784.04	\$1,727.00	\$57.04	\$0.00	\$1,747.00	\$37.04	\$0.00

*This plan is restricted to employees in Unit 8, State University Police Association (SUPA) and requires membership.