

**CalPERS 2020 Regional Health Premiums (Actives and Annuitants)****Effective Date: January 1, 2020**

<b>Region 1</b>									
Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Glenn, Humboldt, Lake, Lassen, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Placer, Plumas, Sacramento, San Benito, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Stanislaus, Sutter, Tehama, Trinity, Tuolumne, Yolo, Yuba									
<b>Basic Monthly Premiums (B)</b>									
<b>Plan</b>	<b>Subscriber</b>	<b>Plan Code</b>	<b>Party Rate</b>	<b>Subscriber &amp; 1 Dependent</b>	<b>Plan Code</b>	<b>Party Rate</b>	<b>Subscriber &amp; 2+ Dependents</b>	<b>Plan Code</b>	<b>Party Rate</b>
Anthem Blue Cross Del Norte	\$861.18	504	1	\$1,722.36	504	2	\$2,239.07	504	3
Anthem Blue Cross Select	868.98	506	1	1,737.96	506	2	2,259.35	506	3
Anthem Blue Cross Traditional	1,184.84	509	1	2,369.68	509	2	3,080.58	509	3
Blue Shield Access+	1,127.77	525	1	2,255.54	525	2	2,932.20	525	3
Blue Shield Access+ EPO	1,127.77	524	1	2,255.54	524	2	2,932.20	524	3
Blue Shield Trio*	833.00	451	1	1,666.00	451	2	2,165.80	451	3
Health Net SmartCare	1,000.52	528	1	2,001.04	528	2	2,601.35	528	3
Kaiser Permanente	768.49	533	1	1,536.98	533	2	1,998.07	533	3
PERS Choice	861.18	548	1	1,722.36	548	2	2,239.07	548	3
PERS Select	520.29	557	1	1,040.58	557	2	1,352.75	557	3
PERS Care	1,133.14	566	1	2,266.28	566	2	2,946.16	566	3
Peace Officers Research Assoc of CA	774.00	592	1	1,699.00	592	2	2,199.00	592	3
UnitedHealthcare	899.94	576	1	1,799.88	576	2	2,339.84	576	3
Western Health Advantage	731.96	591	1	1,463.92	591	2	1,903.10	591	3
<b>Supplement/Managed Medicare Monthly Premiums (M)</b>									
<b>Plan</b>	<b>Subscriber</b>	<b>Plan Code</b>	<b>Party Rate</b>	<b>Subscriber &amp; 1 Dependent</b>	<b>Plan Code</b>	<b>Party Rate</b>	<b>Subscriber &amp; 2+ Dependents</b>	<b>Plan Code</b>	<b>Party Rate</b>
Anthem Blue Cross Select Medicare Preferred	\$388.15	455	4	\$776.30	455	5	\$1,164.45	455	6
Anthem Blue Cross Select Medicare Preferred with Dental <sup>1</sup>	388.15	459	4	776.30	459	5	1,164.45	459	6
Anthem Blue Cross Medicare Preferred	388.15	515	4	776.30	515	5	1,164.45	515	6
Anthem Blue Cross Medicare Preferred with Dental/Vision <sup>1</sup>	388.15	512	4	776.30	512	5	1,164.45	512	6
Kaiser Permanente Senior Advantage	339.43	536	4	678.86	536	5	1,018.29	536	6
Kaiser Permanente Senior Advantage with Dental <sup>2</sup>	339.43	542	4	678.86	542	5	1,018.29	542	6
PERS Choice Medicare Supplement	351.39	551	4	702.78	551	5	1,054.17	551	6
PERS Select Medicare Supplement	351.39	560	4	702.78	560	5	1,054.17	560	6
PERS Care Medicare Supplement	384.78	569	4	769.56	569	5	1,154.34	569	6
Peace Officers Research Assoc of CA Medicare Supplement	513.00	595	4	1,022.00	595	5	1,635.00	595	6
UnitedHealthcare Medicare Advantage	327.03	579	4	654.06	579	5	981.09	579	6
UnitedHealthcare Medicare Advantage with Dental/Vision <sup>3</sup>	327.03	585	4	654.06	585	5	981.09	585	6

\*Blue Shield is introducing a new HMO health plan called Blue Shield Trio. This plan will be available in El Dorado, Los Angeles, Nevada, Placer, Sacramento and Yolo counties.

<sup>1</sup>Dental and Vision coverage is an additional \$38.00 per member per month premium. You will be billed directly for this amount.

<sup>2</sup>Dental benefit is an additional \$15.05 per member per month premium. You will be billed directly for this amount.

<sup>3</sup>Dental and Vision coverage is an additional \$31.65 per member per month premium. You will be billed directly for this amount.

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Combination Monthly Premiums									
Plan	Subscriber in M, & 1 Dependent in B	Plan Code	Party Rate	Subscriber in M, & 2+ Dependents in B	Plan Code	Party Rate	Subscriber in M, 1 Dependent in M, & 1+ Dependent in B	Plan Code	Party Rate
Anthem Blue Cross Del Norte and Medicare Supplement	\$1,212.57	505	7	\$1,729.28	505	8	\$1,219.49	505	9
Anthem Blue Cross Select and Medicare Preferred	1,257.13	457	7	1,778.52	457	8	1,297.69	457	9
Anthem Blue Cross Select and Medicare Preferred with Dental <sup>1</sup>	1,257.13	460	7	1,778.52	460	8	1,297.69	460	9
Anthem Blue Cross Traditional HMO and Medicare Preferred	1,572.99	518	7	2,283.89	518	8	1,487.20	518	9
Anthem Blue Cross Traditional HMO and Medicare Preferred Dental/Vision <sup>1</sup>	1,572.99	521	7	2,283.89	521	8	1,487.20	521	9
Kaiser Permanente and Senior Advantage	1,107.92	539	7	1,569.01	539	8	1,139.95	539	9
Kaiser Permanente and Senior Advantage with Dental <sup>2</sup>	1,107.92	545	7	1,569.01	545	8	1,139.95	545	9
PERS Choice and Medicare Supplement	1,212.57	554	7	1,729.28	554	8	1,219.49	554	9
PERS Select and Medicare Supplement	871.68	563	7	1,183.85	563	8	1,014.95	563	9
PERS Care and Medicare Supplement	1,517.92	572	7	2,197.80	572	8	1,449.44	572	9
Peace Officers Research Assoc of CA and Medicare Supplement	1,438.00	598	7	1,938.00	598	8	1,522.00	598	9
UnitedHealthcare and Medicare Advantage	1,226.97	582	7	1,766.93	582	8	1,194.02	582	9
UnitedHealthcare and Medicare Advantage with Dental/Vision <sup>3</sup>	1,226.97	588	7	1,766.93	588	8	1,194.02	588	9

Combination Monthly Premiums (Continued)									
Plan	Subscriber in B, & 1 Dependent in M	Plan Code	Party Rate	Subscriber in B, & 2+ Dependents in M	Plan Code	Party Rate	Subscriber in B, 1 Dependent in M, & 1+ Dependent in B	Plan Code	Party Rate
Anthem Blue Cross Del Norte and Medicare Supplement	\$1,212.57	505	10	\$1,563.96	505	11	\$1,729.28	505	12
Anthem Blue Cross Select and Medicare Preferred	1,257.13	457	10	1,645.28	457	11	1,778.52	457	12
Anthem Blue Cross Select and Medicare Preferred with Dental	1,257.13	460	10	1,645.28	460	11	1,778.52	460	12
Anthem Blue Cross Traditional HMO and Medicare Preferred	1,572.99	518	10	1,961.14	518	11	2,283.89	518	12
Anthem Blue Cross Traditional HMO and Medicare Preferred Dental/Vision	1,572.99	521	10	1,961.14	521	11	2,283.89	521	12
Kaiser Permanente and Senior Advantage	1,107.92	539	10	1,447.35	539	11	1,569.01	539	12
Kaiser Permanente and Senior Advantage with Dental	1,107.92	545	10	1,447.35	545	11	1,569.01	545	12
PERS Choice and Medicare Supplement	1,212.57	554	10	1,563.96	554	11	1,729.28	554	12
PERS Select and Medicare Supplement	871.68	563	10	1,223.07	563	11	1,183.85	563	12
PERS Care and Medicare Supplement	1,517.92	572	10	1,902.70	572	11	2,197.80	572	12
Peace Officers Research Assoc of CA and Medicare Supplement	1,283.00	598	10	1,896.00	598	11	1,783.00	598	12
UnitedHealthcare and Medicare Advantage	1,226.97	582	10	1,554.00	582	11	1,766.93	582	12
UnitedHealthcare and Medicare Advantage with Dental/Vision <sup>3</sup>	1,226.97	588	10	1,554.00	588	11	1,766.93	588	12

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