

## CaIPERS HEALTH BENEFITS PROGRAM BASIC PLAN RATES

HEALTH PLAN	Enrolled Employee & Eligible Dependents	2024 Total Monthly Premium	All Employee Groups (except Unit 6)			Unit 6		
			2024 Amount Paid by CSU	2024 Amount Paid by Employee	2023 Amount Paid by Employee	2024 Amount Paid by CSU	2024 Amount Paid by Employee	2023 Amount Paid by Employee
<b>ANTHEM BLUE CROSS SELECT HMO CALIFORNIA</b>	Employee Only	\$925.57	\$925.57	\$0.00	\$20.85	\$925.57	\$0.00	\$15.85
	Employee + 1	\$1,851.14	\$1,851.14	\$0.00	\$108.70	\$1,851.14	\$0.00	\$98.70
	Employee + 2 or more	\$2,406.48	\$2,366.00	\$40.48	\$226.01	\$2,386.00	\$20.48	\$206.01
<b>ANTHEM BLUE CROSS TRADITIONAL HMO CALIFORNIA</b>	Employee Only	\$1,197.94	\$983.00	\$214.94	\$233.65	\$988.00	\$209.94	\$228.65
	Employee + 1	\$2,395.88	\$1,890.00	\$505.88	\$534.30	\$1,900.00	\$495.88	\$524.30
	Employee + 2 or more	\$3,114.64	\$2,366.00	\$748.64	\$779.29	\$2,386.00	\$728.64	\$759.29
<b>ANTHEM BLUE CROSS EPO CALIFORNIA (Restricted to Del Norte County)</b>	Employee Only	\$1,215.87	\$983.00	\$232.87	\$200.89	\$988.00	\$227.87	\$195.89
	Employee + 1	\$2,431.74	\$1,890.00	\$541.74	\$468.78	\$1,900.00	\$531.74	\$458.78
	Employee + 2 or more	\$3,161.26	\$2,366.00	\$795.26	\$694.11	\$2,386.00	\$775.26	\$674.11
<b>BLUE SHIELD ACCESS+ CALIFORNIA</b>	Employee Only	\$892.49	\$892.49	\$0.00	\$0.00	\$892.49	\$0.00	\$0.00
	Employee + 1	\$1,784.98	\$1,784.98	\$0.00	\$0.00	\$1,784.98	\$0.00	\$0.00
	Employee + 2 or more	\$2,320.47	\$2,320.47	\$0.00	\$66.79	\$2,320.47	\$0.00	\$46.79
<b>BLUE SHIELD ACCESS+ EPO CALIFORNIA (Restricted to certain counties)</b>	Employee Only	\$892.49	\$892.49	\$0.00	\$0.00	\$892.49	\$0.00	\$0.00
	Employee + 1	\$1,784.98	\$1,784.98	\$0.00	\$0.00	\$1,784.98	\$0.00	\$0.00
	Employee + 2 or more	\$2,320.47	\$2,320.47	\$0.00	\$66.79	\$2,320.47	\$0.00	\$46.79
<b>BLUE SHIELD TRIO (Restricted to certain counties)</b>	Employee Only	\$810.24	\$810.24	\$0.00	\$0.00	\$810.24	\$0.00	\$0.00
	Employee + 1	\$1,620.48	\$1,620.48	\$0.00	\$0.00	\$1,620.48	\$0.00	\$0.00
	Employee + 2 or more	\$2,106.62	\$2,106.62	\$0.00	\$0.00	\$2,106.62	\$0.00	\$0.00
<b>HEALTH NET SALUD Y MAS CALIFORNIA</b>	Employee Only	\$656.96	\$656.96	\$0.00	\$0.00	\$656.96	\$0.00	\$0.00
	Employee + 1	\$1,313.92	\$1,313.92	\$0.00	\$0.00	\$1,313.92	\$0.00	\$0.00
	Employee + 2 or more	\$1,708.10	\$1,708.10	\$0.00	\$0.00	\$1,708.10	\$0.00	\$0.00
<b>KAISER PERMANENTE CALIFORNIA</b>	Employee Only	\$964.15	\$964.15	\$0.00	\$0.00	\$964.15	\$0.00	\$0.00
	Employee + 1	\$1,928.30	\$1,890.00	\$38.30	\$6.36	\$1,900.00	\$28.30	\$0.00
	Employee + 2 or more	\$2,506.79	\$2,366.00	\$140.79	\$92.97	\$2,386.00	\$120.79	\$72.97

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

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<b>KAISER PERMANENTE - OUT OF STATE</b>	Employee Only	\$1,312.45	\$983.00	\$329.45	\$272.43	\$988.00	\$324.45	\$267.43
	Employee + 1	\$2,624.90	\$1,890.00	\$734.90	\$611.86	\$1,900.00	\$724.90	\$601.86
	Employee + 2 or more	\$3,412.37	\$2,366.00	\$1,046.37	\$880.12	\$2,386.00	\$1,026.37	\$860.12
<b>PERS PLATINUM</b>	Employee Only	\$1,215.87	\$983.00	\$232.87	\$200.89	\$988.00	\$227.87	\$195.89
	Employee + 1	\$2,431.74	\$1,890.00	\$541.74	\$468.78	\$1,900.00	\$531.74	\$458.78
	Employee + 2 or more	\$3,161.26	\$2,366.00	\$795.26	\$694.11	\$2,386.00	\$775.26	\$674.11
<b>PERS GOLD</b>	Employee Only	\$859.31	\$859.31	\$0.00	\$0.00	\$859.31	\$0.00	\$0.00
	Employee + 1	\$1,718.62	\$1,718.62	\$0.00	\$0.00	\$1,718.62	\$0.00	\$0.00
	Employee + 2 or more	\$2,234.21	\$2,234.21	\$0.00	\$0.00	\$2,234.21	\$0.00	\$0.00
<b>PEACE OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA (PORAC)*</b>	Employee Only	\$853.00	\$853.00	\$0.00	\$0.00	N/A	N/A	N/A
	Employee + 1	\$1,708.00	\$1,708.00	\$0.00	\$0.00	N/A	N/A	N/A
	Employee + 2 or more	\$2,220.00	\$2,220.00	\$0.00	\$0.00	N/A	N/A	N/A
<b>SHARP PERFORMANCE PLUS CALIFORNIA (Restricted to San Diego County)</b>	Employee Only	\$833.24	\$833.24	\$0.00	\$0.00	\$833.24	\$0.00	\$0.00
	Employee + 1	\$1,666.48	\$1,666.48	\$0.00	\$0.00	\$1,666.48	\$0.00	\$0.00
	Employee + 2 or more	\$2,166.42	\$2,166.42	\$0.00	\$0.00	\$2,166.42	\$0.00	\$0.00
<b>UNITEDHEALTHCARE ALLIANCE HMO CALIFORNIA</b>	Employee Only	\$882.98	\$882.98	\$0.00	\$0.00	\$882.98	\$0.00	\$0.00
	Employee + 1	\$1,765.96	\$1,765.96	\$0.00	\$0.00	\$1,765.96	\$0.00	\$0.00
	Employee + 2 or more	\$2,295.75	\$2,295.75	\$0.00	\$64.47	\$2,295.75	\$0.00	\$44.47
<b>UNITEDHEALTHCARE HARMONY HMO CALIFORNIA</b>	Employee Only	\$763.70	\$763.70	\$0.00	\$0.00	\$763.70	\$0.00	\$0.00
	Employee + 1	\$1,527.40	\$1,527.40	\$0.00	\$0.00	\$1,527.40	\$0.00	\$0.00
	Employee + 2 or more	\$1,985.62	\$1,985.62	\$0.00	\$0.00	\$1,985.62	\$0.00	\$0.00
<b>WESTERN HEALTH ADVANTAGE (Restricted to Bay Area, Sacramento and other Northern regions)</b>	Employee Only	\$807.23	\$807.23	\$0.00	\$0.00	\$807.23	\$0.00	\$0.00
	Employee + 1	\$1,614.46	\$1,614.46	\$0.00	\$0.00	\$1,614.46	\$0.00	\$0.00
	Employee + 2 or more	\$2,098.80	\$2,098.80	\$0.00	\$0.00	\$2,098.80	\$0.00	\$0.00

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