

2022 CaIPERS HEALTH BENEFITS PROGRAM BASIC PLAN RATES

Monthly Employee Cost

HEALTH PLAN	Enrolled Employee & Eligible Dependents	2022 Total Monthly Premium	All Employee Groups (except Unit 6)			Unit 6		
			2022 Amount Paid by CSU	2022 Amount Paid by Employee	2021 Amount Paid by Employee	2022 Amount Paid by CSU	2022 Amount Paid by Employee	2021 Amount Paid by Employee
ANTHEM BLUE CROSS SELECT HMO CALIFORNIA	Employee Only	\$848.08	\$816.00	\$32.08	\$20.79	\$821.00	\$27.08	\$0.00
	Employee + 1	\$1,696.16	\$1,548.00	\$148.16	\$114.58	\$1,558.00	\$138.16	\$72.10
	Employee + 2 or more	\$2,205.01	\$1,983.00	\$222.01	\$180.25	\$2,003.00	\$202.01	\$124.43
ANTHEM BLUE CROSS TRADITIONAL HMO CALIFORNIA	Employee Only	\$1,198.07	\$816.00	\$382.07	\$348.75	\$821.00	\$377.07	\$417.32
	Employee + 1	\$2,396.14	\$1,548.00	\$848.14	\$770.50	\$1,558.00	\$838.14	\$911.64
	Employee + 2 or more	\$3,114.98	\$1,983.00	\$1,131.98	\$1,032.95	\$2,003.00	\$1,111.98	\$1,215.83
ANTHEM BLUE CROSS EPO CALIFORNIA (Restricted to Del Norte County)	Employee Only	\$946.78	\$816.00	\$130.78	\$20.00	\$821.00	\$125.78	\$46.23
	Employee + 1	\$1,893.56	\$1,548.00	\$345.56	\$113.00	\$1,558.00	\$335.56	\$169.46
	Employee + 2 or more	\$2,461.63	\$1,983.00	\$478.63	\$178.20	\$2,003.00	\$458.63	\$251.00
BLUE SHIELD ACCESS+ CALIFORNIA	Employee Only	\$900.22	\$816.00	\$84.22	\$143.16	\$821.00	\$79.22	\$135.96
	Employee + 1	\$1,800.44	\$1,548.00	\$252.44	\$359.32	\$1,558.00	\$242.44	\$348.92
	Employee + 2 or more	\$2,340.57	\$1,983.00	\$357.57	\$498.42	\$2,003.00	\$337.57	\$484.30
BLUE SHIELD ACCESS+ EPO CALIFORNIA (Restricted to Colusa, Mendocino & Sierra Counties)	Employee Only	\$900.22	\$816.00	\$84.22	\$143.16	\$821.00	\$79.22	\$135.96
	Employee + 1	\$1,800.44	\$1,548.00	\$252.44	\$359.32	\$1,558.00	\$242.44	\$348.92
	Employee + 2 or more	\$2,340.57	\$1,983.00	\$357.57	\$498.42	\$2,003.00	\$337.57	\$484.30
BLUE SHIELD TRIO	Employee Only	\$742.70	\$742.70	\$0.00	\$0.00	\$742.70	\$0.00	\$0.00
	Employee + 1	\$1,485.40	\$1,485.40	\$0.00	\$0.00	\$1,485.40	\$0.00	\$0.00
	Employee + 2 or more	\$1,931.02	\$1,931.02	\$0.00	\$0.00	\$1,931.02	\$0.00	\$0.00
HEALTH NET SALUD Y MAS CALIFORNIA	Employee Only	\$486.51	\$486.51	\$0.00	\$0.00	\$486.51	\$0.00	\$0.00
	Employee + 1	\$973.02	\$973.02	\$0.00	\$0.00	\$973.02	\$0.00	\$0.00
	Employee + 2 or more	\$1,264.93	\$1,264.93	\$0.00	\$0.00	\$1,264.93	\$0.00	\$0.00
HEALTH NET SMARTCARE CALIFORNIA	Employee Only	\$1,007.13	\$816.00	\$191.13	\$126.36	\$821.00	\$186.13	\$121.36
	Employee + 1	\$2,014.26	\$1,548.00	\$466.26	\$329.72	\$1,558.00	\$456.26	\$319.72
	Employee + 2 or more	\$2,618.54	\$1,983.00	\$635.54	\$466.34	\$2,003.00	\$615.54	\$446.34

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

HEALTH PLAN	Enrolled Employee & Eligible Dependents	2022 Total Monthly Premium	All Employee Groups (except Unit 6)			Unit 6		
			2022 Amount Paid by CSU	2022 Amount Paid by Employee	2021 Amount Paid by Employee	2022 Amount Paid by CSU	2022 Amount Paid by Employee	2021 Amount Paid by Employee
KAISER PERMANENTE CALIFORNIA	Employee Only	\$804.67	\$804.67	\$0.00	\$0.00	\$804.67	\$0.00	\$0.00
	Employee + 1	\$1,609.34	\$1,548.00	\$61.34	\$4.24	\$1,558.00	\$51.34	\$0.00
	Employee + 2 or more	\$2,092.14	\$1,983.00	\$109.14	\$43.21	\$2,003.00	\$89.14	\$23.21
KAISER PERMANENTE - OUT OF STATE	Employee Only	\$1,138.95	\$816.00	\$322.95	\$242.15	\$821.00	\$317.95	\$237.15
	Employee + 1	\$2,277.90	\$1,548.00	\$729.90	\$561.30	\$1,558.00	\$719.90	\$551.30
	Employee + 2 or more	\$2,961.27	\$1,983.00	\$978.27	\$767.39	\$2,003.00	\$958.27	\$747.39
PERS PLATINUM (formerly PERS Care and PERS Choice)	Employee Only	\$946.78	\$816.00	\$130.78	N/A	\$821.00	\$125.78	N/A
	Employee + 1	\$1,893.56	\$1,548.00	\$345.56	N/A	\$1,558.00	\$335.56	N/A
	Employee + 2 or more	\$2,461.63	\$1,983.00	\$478.63	N/A	\$2,003.00	\$458.63	N/A
PERS GOLD (formerly PERS Select)	Employee Only	\$650.38	\$650.38	\$0.00	\$0.00	\$650.38	\$0.00	\$0.00
	Employee + 1	\$1,300.76	\$1,300.76	\$0.00	\$0.00	\$1,300.76	\$0.00	\$0.00
	Employee + 2 or more	\$1,690.99	\$1,690.99	\$0.00	\$0.00	\$1,690.99	\$0.00	\$0.00
PEACE OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA (PORAC)*	Employee Only	\$750.00	\$750.00	\$0.00	\$0.00	N/A	N/A	N/A
	Employee + 1	\$1,449.00	\$1,449.00	\$0.00	\$0.00	N/A	N/A	N/A
	Employee + 2 or more	\$1,927.00	\$1,927.00	\$0.00	\$0.00	N/A	N/A	N/A
SHARP PERFORMANCE PLUS CALIFORNIA (Restricted to San Diego County)	Employee Only	\$699.21	\$699.21	\$0.00	\$0.00	\$699.21	\$0.00	\$0.00
	Employee + 1	\$1,398.42	\$1,398.42	\$0.00	\$0.00	\$1,398.42	\$0.00	\$0.00
	Employee + 2 or more	\$1,817.95	\$1,817.95	\$0.00	\$0.00	\$1,817.95	\$0.00	\$0.00
UNITEDHEALTHCARE ALLIANCE HMO CALIFORNIA	Employee Only	\$818.03	\$816.00	\$2.03	\$0.00	\$818.03	\$0.00	\$0.00
	Employee + 1	\$1,636.06	\$1,548.00	\$88.06	\$0.00	\$1,558.00	\$78.06	\$0.00
	Employee + 2 or more	\$2,126.88	\$1,983.00	\$143.88	\$27.59	\$2,003.00	\$123.88	\$7.59
UNITEDHEALTHCARE HARMONY HMO CALIFORNIA	Employee Only	\$737.35	\$737.35	\$0.00	N/A	\$737.35	\$0.00	N/A
	Employee + 1	\$1,474.70	\$1,474.70	\$0.00	N/A	\$1,474.70	\$0.00	N/A
	Employee + 2 or more	\$1,917.11	\$1,917.11	\$0.00	N/A	\$1,917.11	\$0.00	N/A
WESTERN HEALTH ADVANTAGE (Restricted to Bay Area, Sacramento, Humboldt, and other Northern regions)	Employee Only	\$741.26	\$741.26	\$0.00	\$0.00	\$741.26	\$0.00	\$0.00
	Employee + 1	\$1,482.52	\$1,482.52	\$0.00	\$0.00	\$1,482.52	\$0.00	\$0.00
	Employee + 2 or more	\$1,927.28	\$1,927.28	\$0.00	\$31.25	\$1,927.28	\$0.00	\$11.25

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