## CalPERS Health Monthly Premiums for Contracting Agencies - Region 1

Effective **01/01/24**, the County maximum monthly contribution is:

Units 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 16X, 17, 18, 19, 30, and Unrepresented Managers (Legislative - Unit 60, Executive - Unit 61, and Senior - Unit 62) is \$2,124.54

Extra Help Units 00, 82, 87, 89, and 90 is \$1,699.64

Employees who elect **Employee Only** coverage, will receive no more than **\$334.58** per month as cash back.

Employees who **Waive** coverage will receive no more than \$343.00 per month as cash back.

Contributions are subject to change if a new/successor MOU is ratified with changes to County contribution

Bargaining Units 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 16X, 17, 18, 19, 30, and Unrepresented Managers (Legislative - Unit 60, Executive - Unit 61, and Senior - Unit 62)

who elect **Employee Plus Two or More Coverage** receive a **\$50.00/month** supplemental County contribution into the cafeteria plan.

	2024 (Region #1)						2023 (Region #1)						
		Plan		Plan		Plan		Plan		Plan		Plan	
Plan	Single	Code	2-Party	Code	Family	Code	Single	Code	2-Party	Code	Family	Code	
Anthem HMO Select *	\$ 1,138.86	5061	\$ 2,277.72	5062	\$ 2,961.04	5063	\$ 1,128.83	5061	\$ 2,257.66	5062	\$ 2,934.96	5063	
Anthem HMO Traditional	\$ 1,339.70	5091	\$ 2,679.40	5092	\$ 3,483.22	5093	\$ 1,210.71	5091	\$ 2,421.42	5092	\$ 3,147.85	5093	
Anthem EPO Del Norte *	\$ 1,314.27	5041	\$ 2,628.54	5042	\$ 3,417.10	5043	\$ 1,200.12	5041	\$ 2,400.24	5042	\$ 3,120.31	5043	
Blue Shield Access+	\$ 1,076.84	5251	\$ 2,153.68	5252	\$ 2,799.78	5253	\$ 1,035.21	5251	\$ 2,070.42	5252	\$ 2,691.55	5253	
Blue Shield Trio *	\$ 946.84	4511	\$ 1,893.68	4512	\$ 2,461.78	4513	\$ 888.94	4511	\$ 1,777.88	4512	\$ 2,311.24	4513	
Health Net SmartCare	N/A	5281	N/A	5282	N/A	5283	\$ 1,174.50	5281	\$ 2,349.00	5282	\$ 3,053.70	5283	
Kaiser Permanente	\$ 1,021.41	5331	\$ 2,042.82	5332	\$ 2,655.67	5333	\$ 913.74	5331	\$ 1,827.48	5332	\$ 2,375.72	5333	
UnitedHealthcare Alliance	\$ 1,091.13	5761	\$ 2,182.26	5762	\$ 2,836.94	5763	\$ 1,044.07	5761	\$ 2,088.14	5762	\$ 2,714.58	5763	
UnitedHealthcare Harmony **	\$ 937.39	4951	\$ 1,874.78	4952	\$ 2,437.21	4953	N/A		N/A		N/A		
Western Health Advantage	\$ 807.23	5911	\$ 1,614.46	5912	\$ 2,098.80	5913	\$ 760.17	5911	\$ 1,520.34	5912	\$ 1,976.44	5913	
PERS Gold PPO	\$ 914.82	6131	\$ 1,829.64	6132	\$ 2,378.53	6133	\$ 825.61	6131	\$ 1,651.22	6132	\$ 2,146.59	6133	
PERS Platinum PPO	\$ 1,314.27	6011	\$ 2,628.54	6012	\$ 3,417.10	6013	\$ 1,200.12	6011	\$ 2,400.24	6012	\$ 3,120.31	6013	
PORAC	\$ 931.00	5921	\$ 2,117.00	5922	\$ 2,651.00	5923	\$ 825.00	5921	\$ 1,875.00	5922	\$ 2,300.00	5923	
* Plan not available in Solano County													

rian not a ranabio in Columb County

Anthem HMO Select is available in Alameda, Contra Costa, El Dorado, Monterey, Placer, Sacramento, San Francisco, San Joaquin, Santa Clara, Santa Cruz, and Stanislaus Counties Anthem EPO Del Norte is only available in Del Norte County

Blue Shield Access+ is NOT available in Napa County

Blue Shield Trio is only available in Butte, El Dorado, Kern, Kings, Monterey, Nevada, Placer, Sacramento, Santa Cruz, Stanislaus, Tulare, and Yolo Counties

Blue Shield EPO is only available in Alpine, Calaveras, Colusa, Inyo, Lake, Lassen, Mendocino, Modoc, Mono, Plumas, Shasta, Sierra, Siskiyou, Tehama, Trinity, and Tuolumne Counties

UnitedHealthcare SignatueValue Alliance is available in Alameda, Contra Costa, El Dorado, Marin, Merced, Placer, Sacramento, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma, Stanislaus, and Yolo Counties

UnitedHealthcare SignatureValue Harmony \*\* is only available in Santa Clara and Santa Cruz Counties

Western Health Advantage is available in El Dorado, Humboldt, Marin, Napa, Placer, Sacramento, Solano, Sonoma, and Yolo Counties

## **CalPERS Health Monthly Premiums for Contracting Agencies - Region 2**

Effective **01/01/24**, the County maximum monthly contribution is:

Units 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 16X, 17, 18, 19, 30, and Unrepresented Managers (Legislative - Unit 60, Executive - Unit 61, and Senior - Unit 62) is \$2,124.54

Extra Help Units 00, 82, 87, 89, and 90 is \$1,699.64

Employees who elect **Employee Only** coverage, will receive no more than \$334.58 per month as cash back.

Employees who **Waive** coverage will receive no more than \$343.00 per month as cash back.

Contributions are subject to change if a new/successor MOU is ratified with changes to County contribution

Bargaining Units 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 16X, 17, 18, 19, 30, and Unrepresented Managers (Legislative - Unit 60, Executive - Unit 61, and Senior - Unit 62)

who elect **Employee Plus Two or More Coverage** receive a **\$50.00/month** supplemental County contribution into the cafeteria plan.

		2024 (Region #2)						2023 (Region #2)						
Plan	Single	Plan Code	2-Party	Plan Code	Family	Plan Code	Single	Plan Code	2-Party	Plan Code	Family	Plan Code		
Anthem HMO Select	\$ 807.71	5071	\$ 1,615.42	5072	\$ 2,100.05	5073	\$ 765.37	5071	\$ 1,530.74	5072	\$ 1,989.96	5073		
Kaiser Permanente	\$ 904.95	5341	\$ 1,809.90	5342	\$ 2,352.87	5343	\$ 756.21	5341	\$ 1,512.42	5342	\$ 1,966.15	5343		

Fresno, Imperial, Inyo, Kern, Kings, Madera, Orange, San Diego, San Luis Obispo, Santa Barbara, Tulare, Ventura