2023 Calpers Health Benefits Program Basic Plan Rates

Monthly Employee Cost

HEALTH PLAN	Enrolled Employee & Eligible Dependents	2023 Total Monthly Premium	All Employee Groups (except Unit 6)			Unit 6		
			2023 Amount Paid by CSU	2023 Amount Paid by Employee	2022 Amount Paid by Employee	2023 Amount Paid by CSU	2023 Amount Paid by Employee	2022 Amount Paid by Employee
ANTHEM BLUE CROSS SELECT HMO CALIFORNIA	Employee Only	\$903.85	\$883.00	\$20.85	\$32.08	\$888.00	\$15.85	\$27.08
	Employee + I	\$1,807.70	\$1,699.00	\$108.70	\$148.16	\$1,709.00	\$98.70	\$138.16
	Employee + 2 or more	\$2,350.01	\$2,124.00	226.01 (-4.00)	\$222.01	\$2,144.00	\$206.01	\$202.01
ANTHEM BLUE CROSS TRADITIONAL HMO CALIFORNIA	Employee Only	\$1,116.65	\$883.00	\$233.65	\$382.07	\$888.00	\$228.65	\$377.07
	Employee + I	\$2,233.30	\$1,699.00	\$534.30	\$848.14	\$1,709.00	\$524.30	\$838.14
	Employee + 2 or more	\$2,903.29	\$2,124.00	\$779.29	\$1,131.98	\$2,144.00	\$759.29	\$1,111.98
ANTHEM BLUE CROSS EPO	Employee Only	\$1,083.89	\$883.00	200.89 (-70.11)	\$130.78	\$888.00	\$195.89	\$125.78
CALIFORNIA (Restricted to Del Norte County)	Employee + I	\$2,167.78	\$1,699.00	468.78 (-123.22)	\$345.56	\$1,709.00	\$458.78	\$335.56
	Employee + 2 or more	\$2,818.11	\$2,124.00	694.11 (-215.48)	\$478.63	\$2,144.00	\$674.11	\$458.63
BLUE SHIELD ACCESS+ CALIFORNIA	Employee Only	\$842.61	\$842.61	\$0.00	\$84.22	\$842.61	\$0.00	\$79.22
	Employee + I	\$1,685.22	\$1,685.22	\$0.00	\$252.44	\$1,685.22	\$0.00	\$242.44
	Employee + 2 or more	\$2,190.79	\$2,124.00	\$66.79	\$357.57	\$2,144.00	\$46.79	\$337.57
BLUE SHIELD ACCESS+ EPO CALIFORNIA (Restricted to Certain Counties)	Employee Only	\$842.61	\$842.61	\$0.00	\$84.22	\$842.61	\$0.00	\$79.22
	Employee + I	\$1,685.22	\$1,685.22	\$0.00	\$252.44	\$1,685.22	\$0.00	\$242.44
	Employee + 2 or more	\$2,190.79	\$2,124.00	\$66.79	\$357.57	\$2,144.00	\$46.79	\$337.57
BLUE SHIELD TRIO (Restricted to Certain Counties)	Employee Only	\$760.71	\$760.71	\$0.00	\$0.00	\$760.71	\$0.00	\$0.00
	Employee + I	\$1,521.42	\$1,521.42	\$0.00	\$0.00	\$1,521.42	\$0.00	\$0.00
	Employee + 2 or more	\$1,977.85	\$1,977.85	\$0.00	\$0.00	\$1,977.85	\$0.00	\$0.00
HEALTH NET SALUD Y MAS CALIFORNIA	Employee Only	\$631.89	\$631.89	\$0.00	\$0.00	\$631.89	\$0.00	\$0.00
	Employee + I	\$1,263.78	\$1,263.78	\$0.00	\$0.00	\$1,263.78	\$0.00	\$0.00
	Employee + 2 or more	\$1,642.91	\$1,642.91	\$0.00	\$0.00	\$1,642.91	\$0.00	\$0.00
HEALTH NET SMARTCARE CALIFORNIA	Employee Only	\$993.39	\$883.00	\$110.39	\$191.13	\$888.00	\$105.39	\$186.13
	Employee + I	\$1,986.78	\$1,699.00	\$287.78	\$466.26	\$1,709.00	\$277.78	\$456.26
	Employee + 2 or more	\$2,582.81	\$2,124.00	\$458.81	\$635.54	\$2,144.00	\$438.81	\$615.54

	Enrolled Employee & Eligible Dependents	2023 Total Monthly Premium	All E	mployee Groups (ex	cept Unit 6)	Unit 6		
HEALTH PLAN			2023 Amount Paid by CSU	2023 Amount Paid by Employee	2022 Amount Paid by Employee	2023 Amount Paid by CSU	2023 Amount Paid by Employee	2022 Amount Paid by Employee
KAISER PERMANENTE CALIFORNIA	Employee Only	\$852.68	\$852.68	\$0.00	\$0.00	\$852.68	\$0.00	\$0.00
	Employee + I	\$1,705.36	\$1,699.00	\$6.36	\$61.34	\$1,705.36	\$0.00	\$51.34
	Employee + 2 or more	\$2,216.97	\$2,124.00	\$92.97	\$109.14	\$2,144.00	\$72.97	\$89.14
KAISER PERMANENTE - OUT OF STATE	Employee Only	\$1,155.43	\$883.00	\$272.43	\$322.95	\$888.00	\$267.43	\$317.95
	Employee + I	\$2,310.86	\$1,699.00	\$611.86	\$729.90	\$1,709.00	\$601.86	\$719.90
	Employee + 2 or more	\$3,004.12	\$2,124.00	\$880.12	\$978.27	\$2,144.00	\$860.12	\$958.27
	Employee Only	\$1,083.89	\$883.00	200.89 (-70.11)	\$130.78	\$888.00	\$195.89	\$125.78
PERS PLATINUM	Employee + I	\$2,167.78	\$1,699.00	468.78 (-123.22)	\$345.56	\$1,709.00	\$458.78	\$335.56
	Employee + 2 or more	\$2,818.11	\$2,124.00	694.11 (-215.48)	\$478.63	\$2,144.00	\$674.11	\$458.63
PERS GOLD	Employee Only	\$766.11	\$766.11	\$0.00	\$0.00	\$766.11	\$0.00	\$0.00
	Employee + I	\$1,532.22	\$1,532.22	\$0.00	\$0.00	\$1,532.22	\$0.00	\$0.00
	Employee + 2 or more	\$1,991.89	\$1,991.89	\$0.00	\$0.00	\$1,991.89	\$0.00	\$0.00
PEACE OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA (PORAC)*	Employee Only	\$775.00	\$775.00	\$0.00	\$0.00			
	Employee + I	\$1,525.00	\$1,525.00	\$0.00	\$0.00	N/A	N/A	N/A
	Employee + 2 or more	\$2,000.00	\$2,000.00	\$0.00	\$0.00			
SHARP PERFORMANCE PLUS CALIFORNIA (Restricted to San Diego County)	Employee Only	\$764.96	\$764.96	\$0.00	\$0.00	\$764.96	\$0.00	\$0.00
	Employee + I	\$1,529.92	\$1,529.92	\$0.00	\$0.00	\$1,529.92	\$0.00	\$0.00
	Employee + 2 or more	\$1,988.90	\$1,988.90	\$0.00	\$0.00	\$1,988.90	\$0.00	\$0.00
UNITEDHEALTHCARE ALLIANCE HMO CALIFORNIA	Employee Only	\$841.72	\$841.72	\$0.00	\$2.03	\$841.72	\$0.00	\$0.00
	Employee + I	\$1,683.44	\$1,683.44	\$0.00	\$88.06	\$1,683.44	\$0.00	\$78.06
	Employee + 2 or more	\$2,188.47	\$2,124.00	\$64.47	\$143.88	\$2,144.00	\$44.47	\$123.88
UNITEDHEALTHCARE HARMONY HMO CALIFORNIA	Employee Only	\$722.28	\$722.28	\$0.00	\$0.00	\$722.28	\$0.00	\$0.00
	Employee + I	\$1,444.56	\$1,444.56	\$0.00	\$0.00	\$1,444.56	\$0.00	\$0.00
	Employee + 2 or more	\$1,877.93	\$1,877.93	\$0.00	\$0.00	\$1,877.93	\$0.00	\$0.00
WESTERN HEALTH ADVANTAGE (Restricted to Bay Area, Sacramento, and other Northern regions)	Employee Only	\$760.17	\$760.17	\$0.00	\$0.00	\$760.17	\$0.00	\$0.00
	Employee + I	\$1,520.34	\$1,520.34	\$0.00	\$0.00	\$1,520.34	\$0.00	\$0.00
	Employee + 2 or more	\$1,976.44	\$1,976.44	\$0.00	\$0.00	\$1,976.44	\$0.00	\$0.00

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