

Early Retiree Medical Premium costs for the CalPERS 'Bay Area' region for 2021

By Bargaining Unit FOR EMPLOYEES HIRED BEFORE 07/01/2003

SUSU, CSEA 821, CSEA 318, Board Members, Operating Engineers, & Police					STA, USA, Management, Confidential *					Retired on or after Feb 1, 2017 SPPA, USA ****				
Tier	Plan / Premium	SUSD Reimbursement to Retiree. **	Employer Share ***	Retiree Cost	Tier	Plan / Premium	SUSD Reimbursement to Retiree. **	Employer Share ***	Retiree Cost	Tier	Plan / Premium	SUSD Reimbursement to Retiree. **	Employer Share ***	Retiree Cost
Blue Shield Access +					Blue Shield Access +					Blue Shield Access +				
Single	\$1,170.08	\$ 480.87	\$ 85.80	\$603.41	Single	\$1,170.08	\$ 480.87	\$ 85.80	\$603.41	Single	\$1,170.08	\$ 480.87	\$ 85.80	\$603.41
Plus 1	\$2,340.16	\$ 480.87	\$ 85.80	\$1,773.49	Plus 1	\$2,340.16	\$ 1,047.54	\$ 85.80	\$1,206.82	Plus 1	\$2,340.16	\$ 1,047.54	\$ 85.80	\$1,206.82
Family	\$3,042.21	\$ 480.87	\$ 85.80	\$2,475.54	Family	\$3,042.21	\$ 1,387.54	\$ 85.80	\$1,568.87	Family	\$3,042.21	\$ 1,047.54	\$ 85.80	\$1,908.87
Blue Shield EPO					Blue Shield EPO					Blue Shield EPO				
Single	\$1,170.08	\$ 480.87	\$ 85.80	\$603.41	Single	\$1,170.08	\$ 480.87	\$ 85.80	\$603.41	Single	\$1,170.08	\$ 480.87	\$ 85.80	\$603.41
Plus 1	\$2,340.16	\$ 480.87	\$ 85.80	\$1,773.49	Plus 1	\$2,340.16	\$ 1,047.54	\$ 85.80	\$1,206.82	Plus 1	\$2,340.16	\$ 1,047.54	\$ 85.80	\$1,206.82
Family	\$3,042.21	\$ 480.87	\$ 85.80	\$2,475.54	Family	\$3,042.21	\$ 1,387.54	\$ 85.80	\$1,568.87	Family	\$3,042.21	\$ 1,047.54	\$ 85.80	\$1,908.87
Blue Shield Trio					Blue Shield Trio					Blue Shield Trio				
Single	\$880.50	\$ 480.87	\$ 85.80	\$313.83	Single	\$880.50	\$ 480.87	\$ 85.80	\$313.83	Single	\$880.50	\$ 480.87	\$ 85.80	\$313.83
Plus 1	\$1,761.00	\$ 480.87	\$ 85.80	\$1,194.33	Plus 1	\$1,761.00	\$ 1,047.54	\$ 85.80	\$627.66	Plus 1	\$1,761.00	\$ 1,047.54	\$ 85.80	\$627.66
Family	\$2,289.30	\$ 480.87	\$ 85.80	\$1,722.63	Family	\$2,289.30	\$ 1,387.54	\$ 85.80	\$815.96	Family	\$2,289.30	\$ 1,047.54	\$ 85.80	\$1,155.96
Kaiser CA					Kaiser CA					Kaiser CA				
Single	\$813.64	\$ 480.87	\$ 85.80	\$246.97	Single	\$813.64	\$ 480.87	\$ 85.80	\$246.97	Single	\$813.64	\$ 480.87	\$ 85.80	\$246.97
Plus 1	\$1,627.28	\$ 480.87	\$ 85.80	\$1,060.61	Plus 1	\$1,627.28	\$ 1,047.54	\$ 85.80	\$493.94	Plus 1	\$1,627.28	\$ 1,047.54	\$ 85.80	\$493.94
Family	\$2,115.46	\$ 480.87	\$ 85.80	\$1,548.79	Family	\$2,115.46	\$ 1,387.54	\$ 85.80	\$642.12	Family	\$2,115.46	\$ 1,047.54	\$ 85.80	\$982.12
PORAC - Police Only					PORAC-Police Only					PORAC-Police Only				
Single	\$799.00	\$ 480.87	\$ 85.80	\$232.33	Single	\$799.00	\$ 480.87	\$ 85.80	\$232.33	Single	\$799.00	\$ 480.87	\$ 85.80	\$232.33
Plus 1	\$1,725.00	\$ 480.87	\$ 85.80	\$1,158.33	Plus 1	\$1,725.00	\$ 1,047.54	\$ 85.80	\$591.66	Plus 1	\$1,725.00	\$ 1,047.54	\$ 85.80	\$591.66
Family	\$2,199.00	\$ 480.87	\$ 85.80	\$1,632.33	Family	\$2,199.00	\$ 1,387.54	\$ 85.80	\$725.66	Family	\$2,199.00	\$ 1,047.54	\$ 85.80	\$1,065.66
PERS Choice					PERS Choice					PERS Choice				
Single	\$935.84	\$ 480.87	\$ 85.80	\$369.17	Single	\$935.84	\$ 480.87	\$ 85.80	\$369.17	Single	\$935.84	\$ 480.87	\$ 85.80	\$369.17
Plus 1	\$1,871.68	\$ 480.87	\$ 85.80	\$1,305.01	Plus 1	\$1,871.68	\$ 1,047.54	\$ 85.80	\$738.34	Plus 1	\$1,871.68	\$ 1,047.54	\$ 85.80	\$738.34
Family	\$2,433.18	\$ 480.87	\$ 85.80	\$1,866.51	Family	\$2,433.18	\$ 1,387.54	\$ 85.80	\$959.84	Family	\$2,433.18	\$ 1,047.54	\$ 85.80	\$1,299.84
PERS Select					PERS Select					PERS Select				
Single	\$566.67	\$ 480.87	\$ 85.80	\$0.00	Single	\$566.67	\$ 480.87	\$ 85.80	\$0.00	Single	\$566.67	\$ 480.87	\$ 85.80	\$0.00
Plus 1	\$1,133.34	\$ 480.87	\$ 85.80	\$566.67	Plus 1	\$1,133.34	\$ 1,047.54	\$ 85.80	\$0.00	Plus 1	\$1,133.34	\$ 1,047.54	\$ 85.80	\$0.00
Family	\$1,473.34	\$ 480.87	\$ 85.80	\$906.67	Family	\$1,473.34	\$ 1,387.54	\$ 85.80	\$0.00	Family	\$1,473.34	\$ 1,047.54	\$ 85.80	\$340.00
PERS Care					PERS Care					PERS Care				
Single	\$1,294.69	\$ 480.87	\$ 85.80	\$728.02	Single	\$1,294.69	\$ 480.87	\$ 85.80	\$728.02	Single	\$1,294.69	\$ 480.87	\$ 85.80	\$728.02
Plus 1	\$2,589.38	\$ 480.87	\$ 85.80	\$2,022.71	Plus 1	\$2,589.38	\$ 1,047.54	\$ 85.80	\$1,456.04	Plus 1	\$2,589.38	\$ 1,047.54	\$ 85.80	\$1,456.04
Family	\$3,366.19	\$ 480.87	\$ 85.80	\$2,799.52	Family	\$3,366.19	\$ 1,387.54	\$ 85.80	\$1,892.85	Family	\$3,366.19	\$ 1,047.54	\$ 85.80	\$2,232.85
HealthNet Smart Care					HealthNet Smart Care					HealthNet Smart Care				
Single	\$1,120.21	\$ 480.87	\$ 85.80	\$553.54	Single	\$1,120.21	\$ 480.87	\$ 85.80	\$553.54	Single	\$1,120.21	\$ 480.87	\$ 85.80	\$553.54
Plus 1	\$2,240.42	\$ 480.87	\$ 85.80	\$1,673.75	Plus 1	\$2,240.42	\$ 1,047.54	\$ 85.80	\$1,107.08	Plus 1	\$2,240.42	\$ 1,047.54	\$ 85.80	\$1,107.08
Family	\$2,912.55	\$ 480.87	\$ 85.80	\$2,345.88	Family	\$2,912.55	\$ 1,387.54	\$ 85.80	\$1,439.21	Family	\$2,912.55	\$ 1,047.54	\$ 85.80	\$1,779.21
Anthem HMO Select					Anthem HMO Select					Anthem HMO Select				
Single	\$925.60	\$ 480.87	\$ 85.80	\$358.93	Single	\$925.60	\$ 480.87	\$ 85.80	\$358.93	Single	\$925.60	\$ 480.87	\$ 85.80	\$358.93
Plus 1	\$1,851.20	\$ 480.87	\$ 85.80	\$1,284.53	Plus 1	\$1,851.20	\$ 1,047.54	\$ 85.80	\$717.86	Plus 1	\$1,851.20	\$ 1,047.54	\$ 85.80	\$717.86
Family	\$2,406.56	\$ 480.87	\$ 85.80	\$1,839.89	Family	\$2,406.56	\$ 1,387.54	\$ 85.80	\$933.22	Family	\$2,406.56	\$ 1,047.54	\$ 85.80	\$1,273.22
Anthem HMO Traditional					Anthem HMO Traditional					Anthem HMO Traditional				
Single	\$1,307.86	\$ 480.87	\$ 85.80	\$741.19	Single	\$1,307.86	\$ 480.87	\$ 85.80	\$741.19	Single	\$1,307.86	\$ 480.87	\$ 85.80	\$741.19
Plus 1	\$2,615.72	\$ 480.87	\$ 85.80	\$2,049.05	Plus 1	\$2,615.72	\$ 1,047.54	\$ 85.80	\$1,482.38	Plus 1	\$2,615.72	\$ 1,047.54	\$ 85.80	\$1,482.38
Family	\$3,400.44	\$ 480.87	\$ 85.80	\$2,833.77	Family	\$3,400.44	\$ 1,387.54	\$ 85.80	\$1,927.10	Family	\$3,400.44	\$ 1,047.54	\$ 85.80	\$2,267.10
Anthem EPO Del Norte					Anthem EPO Del Norte					Anthem EPO Del Norte				
Single	\$935.84	\$ 480.87	\$ 85.80	\$369.17	Single	\$935.84	\$ 480.87	\$ 85.80	\$369.17	Single	\$935.84	\$ 480.87	\$ 85.80	\$369.17
Plus 1	\$1,871.68	\$ 480.87	\$ 85.80	\$1,305.01	Plus 1	\$1,871.68	\$ 1,047.54	\$ 85.80	\$738.34	Plus 1	\$1,871.68	\$ 1,047.54	\$ 85.80	\$738.34
Family	\$2,433.18	\$ 480.87	\$ 85.80	\$1,866.51	Family	\$2,433.18	\$ 1,387.54	\$ 85.80	\$959.84	Family	\$2,433.18	\$ 1,047.54	\$ 85.80	\$1,299.84
UnitedHealthcare					UnitedHealthcare					UnitedHealthcare				
Single	\$941.17	\$ 480.87	\$ 85.80	\$374.50	Single	\$941.17	\$ 480.87	\$ 85.80	\$374.50	Single	\$941.17	\$ 480.87	\$ 85.80	\$374.50
Plus 1	\$1,882.34	\$ 480.87	\$ 85.80	\$1,315.67	Plus 1	\$1,882.34	\$ 1,047.54	\$ 85.80	\$749.00	Plus 1	\$1,882.34	\$ 1,047.54	\$ 85.80	\$749.00
Family	\$2,447.04	\$ 480.87	\$ 85.80	\$1,880.37	Family	\$2,447.04	\$ 1,387.54	\$ 85.80	\$973.70	Family	\$2,447.04	\$ 1,047.54	\$ 85.80	\$1,313.70
Western Health Advantage					Western Health Advantage					Western Health Advantage				
Single	\$757.02	\$ 480.87	\$ 85.80	\$190.35	Single	\$757.02	\$ 480.87	\$ 85.80	\$190.35	Single	\$757.02	\$ 480.87	\$ 85.80	\$190.35
Plus 1	\$1,514.04	\$ 480.87	\$ 85.80	\$947.37	Plus 1	\$1,514.04	\$ 1,047.54	\$ 85.80	\$380.70	Plus 1	\$1,514.04	\$ 1,047.54	\$ 85.80	\$380.70
Family	\$1,968.25	\$ 480.87	\$ 85.80	\$1,401.58	Family	\$1,968.25	\$ 1,387.54	\$ 85.80	\$494.91	Family	\$1,968.25	\$ 1,047.54	\$ 85.80	\$834.91

* The following groups have negotiated multiple dependents medical coverage for early retirees.

** SUSD cost is the least expensive medical plan premium, (PERS Select PPO 2021) for early retirees hired before 07/01/2003.

*** Employer Share of \$85.8 is paid directly to CalPERS in accordance with the CalPERS enrollment rules for school districts participating in the health benefits program

**** The following groups have negotiated plus one dependent medical coverage for employees retiring on or after Feb 1, 2017 based on the least expensive medical plan, (PERS Select PPO).