

Early Retiree Medical Premium costs for the CalPERS 'Bay Area' region for 2023

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 | \$1,035.21 | \$ 654.47 | \$ 105.70 | \$275.04 | Single | \$1,035.21 | \$ 654.47 | \$ 105.70 | \$275.04 | Single | \$1,035.21 | \$ 654.47 | \$ 105.70 | \$275.04 |
| Plus 1 | \$2,070.42 | \$ 654.47 | \$ 105.70 | \$1,310.25 | Plus 1 | \$2,070.42 | \$ 1,414.64 | \$ 105.70 | \$550.08 | Plus 1 | \$2,070.42 | \$ 1,414.64 | \$ 105.70 | \$550.08 |
| Family | \$2,691.55 | \$ 654.47 | \$ 105.70 | \$1,931.38 | Family | \$2,691.55 | \$ 1,870.74 | \$ 105.70 | \$715.10 | Family | \$2,691.55 | \$ 1,414.64 | \$ 105.70 | \$1,171.21 |
| Blue Shield EPO | | | | | Blue Shield EPO | | | | | Blue Shield EPO | | | | |
| Single | \$1,035.21 | \$ 654.47 | \$ 105.70 | \$275.04 | Single | \$1,035.21 | \$ 654.47 | \$ 105.70 | \$275.04 | Single | \$1,035.21 | \$ 654.47 | \$ 105.70 | \$275.04 |
| Plus 1 | \$2,070.42 | \$ 654.47 | \$ 105.70 | \$1,310.25 | Plus 1 | \$2,070.42 | \$ 1,414.64 | \$ 105.70 | \$550.08 | Plus 1 | \$2,070.42 | \$ 1,414.64 | \$ 105.70 | \$550.08 |
| Family | \$2,691.55 | \$ 654.47 | \$ 105.70 | \$1,931.38 | Family | \$2,691.55 | \$ 1,870.74 | \$ 105.70 | \$715.10 | Family | \$2,691.55 | \$ 1,414.64 | \$ 105.70 | \$1,171.21 |
| Blue Shield Trio | | | | | Blue Shield Trio | | | | | Blue Shield Trio | | | | |
| Single | \$888.94 | \$ 654.47 | \$ 105.70 | \$128.77 | Single | \$888.94 | \$ 654.47 | \$ 105.70 | \$128.77 | Single | \$888.94 | \$ 654.47 | \$ 105.70 | \$128.77 |
| Plus 1 | \$1,777.88 | \$ 654.47 | \$ 105.70 | \$1,017.71 | Plus 1 | \$1,777.88 | \$ 1,414.64 | \$ 105.70 | \$257.54 | Plus 1 | \$1,777.88 | \$ 1,414.64 | \$ 105.70 | \$257.54 |
| Family | \$2,311.24 | \$ 654.47 | \$ 105.70 | \$1,551.07 | Family | \$2,311.24 | \$ 1,870.74 | \$ 105.70 | \$334.80 | Family | \$2,311.24 | \$ 1,414.64 | \$ 105.70 | \$790.90 |
| Kaiser CA | | | | | Kaiser CA | | | | | Kaiser CA | | | | |
| Single | \$913.74 | \$ 654.47 | \$ 105.70 | \$153.57 | Single | \$913.74 | \$ 654.47 | \$ 105.70 | \$153.57 | Single | \$913.74 | \$ 654.47 | \$ 105.70 | \$153.57 |
| Plus 1 | \$1,827.48 | \$ 654.47 | \$ 105.70 | \$1,067.31 | Plus 1 | \$1,827.48 | \$ 1,414.64 | \$ 105.70 | \$307.14 | Plus 1 | \$1,827.48 | \$ 1,414.64 | \$ 105.70 | \$307.14 |
| Family | \$2,375.72 | \$ 654.47 | \$ 105.70 | \$1,615.55 | Family | \$2,375.72 | \$ 1,870.74 | \$ 105.70 | \$399.28 | Family | \$2,375.72 | \$ 1,414.64 | \$ 105.70 | \$855.38 |
| PORAC - Police Only | | | | | PORAC-Police Only | | | | | PORAC-Police Only | | | | |
| Single | \$825.00 | \$ 654.47 | \$ 105.70 | \$64.83 | Single | \$825.00 | \$ 654.47 | \$ 105.70 | \$64.83 | Single | \$825.00 | \$ 654.47 | \$ 105.70 | \$64.83 |
| Plus 1 | \$1,875.00 | \$ 654.47 | \$ 105.70 | \$1,114.83 | Plus 1 | \$1,875.00 | \$ 1,414.64 | \$ 105.70 | \$354.66 | Plus 1 | \$1,875.00 | \$ 1,414.64 | \$ 105.70 | \$354.66 |
| Family | \$2,300.00 | \$ 654.47 | \$ 105.70 | \$1,539.83 | Family | \$2,300.00 | \$ 1,870.74 | \$ 105.70 | \$323.56 | Family | \$2,300.00 | \$ 1,414.64 | \$ 105.70 | \$779.66 |
| PERS Gold | | | | | PERS Gold | | | | | PERS Gold | | | | |
| Single | \$825.61 | \$ 654.47 | \$ 105.70 | \$65.44 | Single | \$825.61 | \$ 654.47 | \$ 105.70 | \$65.44 | Single | \$825.61 | \$ 654.47 | \$ 105.70 | \$65.44 |
| Plus 1 | \$1,651.22 | \$ 654.47 | \$ 105.70 | \$891.05 | Plus 1 | \$1,651.22 | \$ 1,414.64 | \$ 105.70 | \$130.88 | Plus 1 | \$1,651.22 | \$ 1,414.64 | \$ 105.70 | \$130.88 |
| Family | \$2,146.59 | \$ 654.47 | \$ 105.70 | \$1,386.42 | Family | \$2,146.59 | \$ 1,870.74 | \$ 105.70 | \$170.14 | Family | \$2,146.59 | \$ 1,414.64 | \$ 105.70 | \$626.25 |
| PERS Platinum | | | | | PERS Platinum | | | | | PERS Platinum | | | | |
| Single | \$1,200.12 | \$ 654.47 | \$ 105.70 | \$439.95 | Single | \$1,200.12 | \$ 654.47 | \$ 105.70 | \$439.95 | Single | \$1,200.12 | \$ 654.47 | \$ 105.70 | \$439.95 |
| Plus 1 | \$2,400.24 | \$ 654.47 | \$ 105.70 | \$1,640.07 | Plus 1 | \$2,400.24 | \$ 1,414.64 | \$ 105.70 | \$879.90 | Plus 1 | \$2,400.24 | \$ 1,414.64 | \$ 105.70 | \$879.90 |
| Family | \$3,120.31 | \$ 654.47 | \$ 105.70 | \$2,360.14 | Family | \$3,120.31 | \$ 1,870.74 | \$ 105.70 | \$1,143.87 | Family | \$3,120.31 | \$ 1,414.64 | \$ 105.70 | \$1,599.97 |
| HealthNet Smart Care | | | | | HealthNet Smart Care | | | | | HealthNet Smart Care | | | | |
| Single | \$1,174.50 | \$ 654.47 | \$ 105.70 | \$414.33 | Single | \$1,174.50 | \$ 654.47 | \$ 105.70 | \$414.33 | Single | \$1,174.50 | \$ 654.47 | \$ 105.70 | \$414.33 |
| Plus 1 | \$2,349.00 | \$ 654.47 | \$ 105.70 | \$1,588.83 | Plus 1 | \$2,349.00 | \$ 1,414.64 | \$ 105.70 | \$828.66 | Plus 1 | \$2,349.00 | \$ 1,414.64 | \$ 105.70 | \$828.66 |
| Family | \$3,053.70 | \$ 654.47 | \$ 105.70 | \$2,293.53 | Family | \$3,053.70 | \$ 1,870.74 | \$ 105.70 | \$1,077.26 | Family | \$3,053.70 | \$ 1,414.64 | \$ 105.70 | \$1,533.36 |
| Anthem HMO Select | | | | | Anthem HMO Select | | | | | Anthem HMO Select | | | | |
| Single | \$1,128.83 | \$ 654.47 | \$ 105.70 | \$368.66 | Single | \$1,128.83 | \$ 654.47 | \$ 105.70 | \$368.66 | Single | \$1,128.83 | \$ 654.47 | \$ 105.70 | \$368.66 |
| Plus 1 | \$2,257.66 | \$ 654.47 | \$ 105.70 | \$1,497.49 | Plus 1 | \$2,257.66 | \$ 1,414.64 | \$ 105.70 | \$737.32 | Plus 1 | \$2,257.66 | \$ 1,414.64 | \$ 105.70 | \$737.32 |
| Family | \$2,934.96 | \$ 654.47 | \$ 105.70 | \$2,174.79 | Family | \$2,934.96 | \$ 1,870.74 | \$ 105.70 | \$958.52 | Family | \$2,934.96 | \$ 1,414.64 | \$ 105.70 | \$1,414.62 |
| Anthem HMO Traditional | | | | | Anthem HMO Traditional | | | | | Anthem HMO Traditional | | | | |
| Single | \$1,210.71 | \$ 654.47 | \$ 105.70 | \$450.54 | Single | \$1,210.71 | \$ 654.47 | \$ 105.70 | \$450.54 | Single | \$1,210.71 | \$ 654.47 | \$ 105.70 | \$450.54 |
| Plus 1 | \$2,421.42 | \$ 654.47 | \$ 105.70 | \$1,661.25 | Plus 1 | \$2,421.42 | \$ 1,414.64 | \$ 105.70 | \$901.08 | Plus 1 | \$2,421.42 | \$ 1,414.64 | \$ 105.70 | \$901.08 |
| Family | \$3,147.85 | \$ 654.47 | \$ 105.70 | \$2,387.68 | Family | \$3,147.85 | \$ 1,870.74 | \$ 105.70 | \$1,171.40 | Family | \$3,147.85 | \$ 1,414.64 | \$ 105.70 | \$1,627.51 |
| Anthem EPO Del Norte | | | | | Anthem EPO Del Norte | | | | | Anthem EPO Del Norte | | | | |
| Single | \$1,200.12 | \$ 654.47 | \$ 105.70 | \$439.95 | Single | \$1,200.12 | \$ 654.47 | \$ 105.70 | \$439.95 | Single | \$1,200.12 | \$ 654.47 | \$ 105.70 | \$439.95 |
| Plus 1 | \$2,400.24 | \$ 654.47 | \$ 105.70 | \$1,640.07 | Plus 1 | \$2,400.24 | \$ 1,414.64 | \$ 105.70 | \$879.90 | Plus 1 | \$2,400.24 | \$ 1,414.64 | \$ 105.70 | \$879.90 |
| Family | \$3,120.31 | \$ 654.47 | \$ 105.70 | \$2,360.14 | Family | \$3,120.31 | \$ 1,870.74 | \$ 105.70 | \$1,143.87 | Family | \$3,120.31 | \$ 1,414.64 | \$ 105.70 | \$1,599.97 |
| UnitedHealthcare | | | | | UnitedHealthcare | | | | | UnitedHealthcare | | | | |
| Single | \$1,044.07 | \$ 654.47 | \$ 105.70 | \$283.90 | Single | \$1,044.07 | \$ 654.47 | \$ 105.70 | \$283.90 | Single | \$1,044.07 | \$ 654.47 | \$ 105.70 | \$283.90 |
| Plus 1 | \$2,088.14 | \$ 654.47 | \$ 105.70 | \$1,327.97 | Plus 1 | \$2,088.14 | \$ 1,414.64 | \$ 105.70 | \$567.80 | Plus 1 | \$2,088.14 | \$ 1,414.64 | \$ 105.70 | \$567.80 |
| Family | \$2,714.58 | \$ 654.47 | \$ 105.70 | \$1,954.41 | Family | \$2,714.58 | \$ 1,870.74 | \$ 105.70 | \$738.14 | Family | \$2,714.58 | \$ 1,414.64 | \$ 105.70 | \$1,194.24 |
| Western Health Advantage | | | | | Western Health Advantage | | | | | Western Health Advantage | | | | |
| Single | \$760.17 | \$ 654.47 | \$ 105.70 | \$0.00 | Single | \$760.17 | \$ 654.47 | \$ 105.70 | \$0.00 | Single | \$760.17 | \$ 654.47 | \$ 105.70 | \$0.00 |
| Plus 1 | \$1,520.34 | \$ 654.47 | \$ 105.70 | \$760.17 | Plus 1 | \$1,520.34 | \$ 1,414.64 | \$ 105.70 | \$0.00 | Plus 1 | \$1,520.34 | \$ 1,414.64 | \$ 105.70 | \$0.00 |
| Family | \$1,976.44 | \$ 654.47 | \$ 105.70 | \$1,216.27 | Family | \$1,976.44 | \$ 1,870.74 | \$ 105.70 | \$0.00 | Family | \$1,976.44 | \$ 1,414.64 | \$ 105.70 | \$456.10 |

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

** SUSD cost is the least expensive medical plan premium, (Western Health Advantage HMO 2023) for early retirees hired before 07/01/2003.

*** Employer Share of \$105.7 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, (Western Health Advantage HMO).