## CaIPERS Health Benefits Program

2022-2023
Basic Plan Rate Comparison

| HEALTH PLAN | Enrolled Employee \& Eligible Dependents | 2022 |  |  |  | 2023 |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Amount Paid by CSU | Employee Mo. Ded | Amount Paid by CSU | Unit 6 Mo. Ded | Amount Paid by CSU | Employee Mo. Ded | Amount Paid by CSU | Unit 6 Mo. Ded |
| ANTHEM BLUE CROSS SELECT (HMO) | Employee Only | \$816.00 | \$32.08 | \$821.00 | \$27.08 | \$883.00 | \$20.85 | \$888.00 | \$15.85 |
|  | Employee + 1 | \$1,548.00 | \$148.16 | \$1,558.00 | \$138.16 | \$1,699.00 | \$108.70 | \$1,709.00 | \$98.70 |
|  | Employee + 2 or more | \$1,983.00 | \$222.01 | \$2,003.00 | \$202.01 | \$2,124.00 | \$226.01 | \$2,144.00 | \$206.01 |
| ANTHEM BLUE CROSS TRADITIONAL (HMO) | Employee Only | \$816.00 | \$382.07 | \$821.00 | \$377.07 | \$883.00 | \$233.65 | \$888.00 | \$228.65 |
|  | Employee + 1 | \$1,548.00 | \$848.14 | \$1,558.00 | \$838.14 | \$1,699.00 | \$534.30 | \$1,709.00 | \$524.30 |
|  | Employee + 2 or more | \$1,983.00 | \$1,131.98 | \$2,003.00 | \$1,111.98 | \$2,124.00 | \$779.29 | \$2,144.00 | \$759.29 |
| BLUE SHIELD ACCESS+ (HMO) | Employee Only | \$742.70 | \$84.22 | \$821.00 | \$79.22 | \$842.61 | \$0.00 | \$842.61 | \$0.00 |
|  | Employee + 1 | \$1,548.00 | \$252.44 | \$1,558.00 | \$242.44 | \$1,685.22 | \$0.00 | \$1,685.22 | \$0.00 |
|  | Employee + 2 or more | \$1,983.00 | \$357.57 | \$2,003.00 | \$337.57 | \$2,124.00 | \$66.79 | \$2,144.00 | \$46.79 |
| BLUE SHIELD TRIO* (HMO) | Employee Only | \$742.70 | \$0.00 | \$742.70 | \$0.00 | \$760.71 | \$0.00 | \$760.71 | \$0.00 |
|  | Employee + 1 | \$1,485.40 | \$0.00 | \$1,485.40 | \$0.00 | \$1,521.42 | \$0.00 | \$1,521.42 | \$0.00 |
|  | Employee + 2 or more | \$1,931.02 | \$0.00 | \$1,931.02 | \$0.00 | \$1,977.85 | \$0.00 | \$1,977.85 | \$0.00 |
| HEALTH NET SALUD Y MAS (HMO) | Employee Only | \$486.51 | \$0.00 | \$486.51 | \$0.00 | \$631.89 | \$0.00 | \$631.89 | \$0.00 |
|  | Employee + 1 | \$973.02 | \$0.00 | \$973.02 | \$0.00 | \$1,263.78 | \$0.00 | \$1,263.78 | \$0.00 |
|  | Employee + 2 or more | \$1,264.93 | \$0.00 | \$1,264.93 | \$0.00 | \$1,642.91 | \$0.00 | \$1,642.91 | \$0.00 |
| HEALTH NET SMARTCARE (HMO) | Employee Only | \$816.00 | \$191.13 | \$821.00 | \$186.13 | \$883.00 | \$110.39 | \$888.00 | \$105.39 |
|  | Employee + 1 | \$1,548.00 | \$466.26 | \$1,558.00 | \$456.26 | \$1,699.00 | \$287.78 | \$1,709.00 | \$277.78 |
|  | Employee + 2 or more | \$1,983.00 | \$635.54 | \$2,003.00 | \$615.54 | \$2,124.00 | \$458.81 | \$2,144.00 | \$438.81 |
| KAISER PERMANENTE (HMO) | Employee Only | \$804.67 | \$0.00 | \$804.67 | \$0.00 | \$852.68 | \$0.00 | \$852.68 | \$0.00 |
|  | Employee + 1 | \$1,548.00 | \$61.34 | \$1,558.00 | \$51.34 | \$1,699.00 | \$6.36 | \$1,705.36 | \$0.00 |
|  | Employee + 2 or more | \$1,983.00 | \$109.14 | \$2,003.00 | \$89.14 | \$2,124.00 | \$92.97 | \$2,144.00 | \$72.97 |
| PERS PLATINUM (PPO) | Employee Only | \$816.00 | \$130.78 | \$821.00 | \$125.78 | \$883.00 | \$200.89 | \$888.00 | \$195.89 |
|  | Employee + 1 | \$1,548.00 | \$345.56 | \$1,558.00 | \$335.56 | \$1,699.00 | \$468.78 | \$1,709.00 | \$458.78 |
|  | Employee + 2 or more | \$1,983.00 | \$478.63 | \$2,003.00 | \$458.63 | \$2,124.00 | \$694.11 | \$2,144.00 | \$674.11 |
| PERS GOLD (PPO) | Employee Only | \$650.38 | \$0.00 | \$650.38 | \$0.00 | \$766.11 | \$0.00 | \$766.11 | \$0.00 |
|  | Employee + 1 | \$1,300.76 | \$0.00 | \$1,300.76 | \$0.00 | \$1,532.22 | \$0.00 | \$1,532.22 | \$0.00 |
|  | Employee + 2 or more | \$1,690.99 | \$0.00 | \$1,690.99 | \$0.00 | \$1,991.89 | \$0.00 | \$1,991.89 | \$0.00 |
| PEACE OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA (PORAC)* (PPO) | Employee Only | \$750.00 | \$0.00 |  |  | \$775.00 | \$0.00 |  |  |
|  | Employee + 1 | \$1,449.00 | \$0.00 |  |  | \$1,525.00 | \$0.00 |  |  |
|  | Employee + 2 or more | \$1,927.00 | \$0.00 |  |  | \$2,000.00 | \$0.00 |  |  |
| UNITEDHEALTHCARE ALLIANCE (HMO) | Employee Only | \$816.00 | \$2.03 | \$818.03 | \$0.00 | \$841.72 | \$0.00 | \$841.72 | \$0.00 |
|  | Employee + 1 | \$1,548.00 | \$88.06 | \$1,558.00 | \$78.06 | \$1,683.44 | \$0.00 | \$1,683.44 | \$0.00 |
|  | Employee + 2 or more | \$1,983.00 | \$143.88 | \$2,003.00 | \$123.88 | \$2,124.00 | \$64.47 | \$2,144.00 | \$44.47 |
| UNITEDHEALTHCARE HARMONY (HMO) | Employee Only | \$737.35 | \$0.00 | \$737.35 | \$0.00 | \$722.28 | \$0.00 | \$722.28 | \$0.00 |
|  | Employee + 1 | \$1,474.70 | \$0.00 | \$1,474.70 | \$0.00 | \$1,444.56 | \$0.00 | \$1,444.56 | \$0.00 |
|  | Employee + 2 or more | \$1,917.11 | \$0.00 | \$1,917.11 | \$0.00 | \$1,877.93 | \$0.00 | \$1,877.93 | \$0.00 |

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[^0]:    *Restricted to participating Trio networks and ZIP codes within Los Angeles County.
    ${ }^{* *}$ This plan is available in Los Angeles, Orange, Riverside, San Bernardino and San Diego Counties
    ${ }^{* * *}$ This plan is restricted to employees in Unit 8, State University Police Association (SUPA) and requires membership.

