

**2022 CalPERS Health Benefits Program
Basic Plan Rates Comparison**

HEALTH PLAN	Enrolled Employee & Eligible Dependents	Plan	2021			2022		
			Total Mo. Premium	Employee Monthly Cost (except Unit 6)	Unit 6 Only Monthly Cost	Total Mo. Premium	Employee Monthly Cost (except Unit 6)	Unit 6 Only Monthly Cost
ANTHEM BLUE CROSS - PERS PLATINUM PPO (formerly PERSCare & PERS Choice PPOs)	Employee Only	434	N/A	N/A	N/A	\$ 946.78	\$ 130.78	\$ 125.78
	Employee + 1 Dependent		\$1,893.56	\$ 345.56	\$ 335.56			
	Employee + 2 or more		\$2,461.63	\$ 478.63	\$ 458.63			
ANTHEM BLUE CROSS - PERS GOLD PPO (formerly PERS Select PPO)	Employee Only	437	N/A	N/A	N/A	\$ 650.38	\$ 0.00	\$ 0.00
	Employee + 1 Dependent		\$1,300.76	\$ 0.00	\$ 0.00			
	Employee + 2 or more		\$1,690.99	\$ 0.00	\$ 0.00			
ANTHEM BLUE CROSS - SELECT HMO CALIFORNIA	Employee Only	181	\$ 800.55	\$ 2.55	\$ 0.00	\$ 848.08	\$ 32.08	\$ 27.08
	Employee + 1 Dependent		\$1,601.10	\$ 82.10	\$ 72.10	\$1,696.16	\$ 148.16	\$ 138.16
	Employee + 2 or more		\$2,081.43	\$ 144.43	\$ 124.43	\$2,205.01	\$ 222.01	\$ 202.01
ANTHEM BLUE CROSS - TRADITIONAL HMO CALIFORNIA	Employee Only	180	\$1,220.32	\$ 422.32	\$ 417.32	\$1,198.07	\$ 382.07	\$ 377.07
	Employee + 1 Dependent		\$2,440.64	\$ 921.64	\$ 911.64	\$2,396.14	\$ 848.14	\$ 838.14
	Employee + 2 or more		\$3,172.83	\$ 1,235.83	\$ 1,215.83	\$3,114.98	\$ 1,131.98	\$ 1,111.98
ANTHEM BLUE CROSS - EPO CALIFORNIA (Available in Del Norte County only)	Employee Only	172	\$ 849.23	\$ 51.23	\$ 46.23	\$ 946.78	\$ 130.78	\$ 125.78
	Employee + 1 Dependent		\$1,698.46	\$ 179.46	\$ 169.46	\$1,893.56	\$ 345.56	\$ 335.56
	Employee + 2 or more		\$2,208.00	\$ 271.00	\$ 251.00	\$2,461.63	\$ 478.63	\$ 458.63
BLUE SHIELD ACCESS+ CALIFORNIA (HMO)	Employee Only	141	\$ 938.96	\$ 140.96	\$ 135.96	\$ 900.22	\$ 84.22	\$ 79.22
	Employee + 1 Dependent		\$1,877.92	\$ 358.92	\$ 348.92	\$1,800.44	\$ 252.44	\$ 242.44
	Employee + 2 or more		\$2,441.30	\$ 504.30	\$ 484.30	\$2,340.57	\$ 357.57	\$ 337.57
BLUE SHIELD ACCESS + EPO CALIFORNIA - (Colusa, Mendocino & Sierra counties only)	Employee Only	191	\$ 938.96	\$ 140.96	\$ 135.96	\$ 900.22	\$ 84.22	\$ 79.22
	Employee + 1 Dependent		\$1,877.92	\$ 358.92	\$ 348.92	\$1,800.44	\$ 252.44	\$ 242.44
	Employee + 2 or more		\$2,441.30	\$ 504.30	\$ 484.30	\$2,340.57	\$ 357.57	\$ 337.57
BLUE SHIELD TRIO - (El Dorado, Los Angeles, Nevada, Placer, Sacramento & Yolo counties only)	Employee Only	471	\$ 722.56	\$ 0.00	\$ 0.00	\$ 742.70	\$ 0.00	\$ 0.00
	Employee + 1 Dependent		\$1,445.12	\$ 0.00	\$ 0.00	\$1,485.40	\$ 0.00	\$ 0.00
	Employee + 2 or more		\$1,878.66	\$ 0.00	\$ 0.00	\$1,931.02	\$ 0.00	\$ 0.00
HEALTH NET SALUD Y MAS CALIFORNIA	Employee Only	184	\$ 425.02	\$ 0.00	\$ 0.00	\$ 486.51	\$ 0.00	\$ 0.00
	Employee + 1 Dependent		\$ 850.04	\$ 0.00	\$ 0.00	\$ 973.02	\$ 0.00	\$ 0.00
	Employee + 2 or more		\$1,105.05	\$ 0.00	\$ 0.00	\$1,264.93	\$ 0.00	\$ 0.00
HEALTH NET SMARTCARE CALIFORNIA	Employee Only	185	\$ 924.36	\$ 126.36	\$ 121.36	\$1,007.13	\$ 191.13	\$ 186.13
	Employee + 1 Dependent		\$1,848.72	\$ 329.72	\$ 319.72	\$2,014.26	\$ 466.26	\$ 456.26
	Employee + 2 or more		\$2,403.34	\$ 466.34	\$ 446.34	\$2,618.54	\$ 635.54	\$ 615.54
KAISER PERMANENTE CALIFORNIA (HMO)	Employee Only	056	\$ 761.62	\$ 0.00	\$ 0.00	\$ 804.67	\$ 0.00	\$ 0.00
	Employee + 1 Dependent		\$1,523.24	\$ 4.24	\$ 0.00	\$1,609.34	\$ 61.34	\$ 51.34
	Employee + 2 or more		\$1,980.21	\$ 43.21	\$ 23.21	\$2,092.14	\$ 109.14	\$ 89.14
KAISER PERMANENTE - OUT OF STATE (HMO)	Employee Only	Codes vary by region	\$1,040.15	\$ 242.15	\$ 237.15	\$1,138.95	\$ 322.95	\$ 317.95
	Employee + 1 Dependent		\$2,080.30	\$ 561.30	\$ 551.30	\$2,277.90	\$ 729.90	\$ 719.90
	Employee + 2 or more		\$2,704.39	\$ 767.39	\$ 747.39	\$2,961.27	\$ 978.27	\$ 958.27

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PEACE OFFICERS RESEARCH ASSOC. OF CALIFORNIA (PORAC)** (PPO)	Employee Only	207	\$ 750.00	\$ 0.00	N/A	\$ 750.00	\$ 0.00	N/A
	Employee + 1 Dependent		\$1,449.00	\$ 0.00		\$1,449.00	\$ 0.00	
	Employee + 2 or more		\$1,927.00	\$ 0.00		\$1,927.00	\$ 0.00	
SHARP PERFORMANCE PLUS CALIFORNIA (Restricted to San Diego County)	Employee Only	189	\$ 632.27	\$ 0.00	\$ 0.00	\$ 699.21	\$ 0.00	\$ 0.00
	Employee + 1 Dependent		\$1,264.54	\$ 0.00	\$ 0.00	\$1,398.42	\$ 0.00	\$ 0.00
	Employee + 2 or more		\$1,643.90	\$ 0.00	\$ 0.00	\$1,817.95	\$ 0.00	\$ 0.00
UNITEDHEALTHCARE ALLIANCE HMO CALIFORNIA	Employee Only	187	\$ 755.61	\$ 0.00	\$ 0.00	\$ 818.03	\$ 2.03	\$ 0.00
	Employee + 1 Dependent		\$1,511.22	\$ 0.00	\$ 0.00	\$1,636.05	\$ 88.06	\$ 78.06
	Employee + 2 or more		\$1,964.59	\$ 27.59	\$ 7.59	\$2,126.88	\$ 143.88	\$ 123.88
UNITEDHEALTHCARE HARMONY HMO CALIFORNIA	Employee Only	319	N/A	N/A	N/A	\$ 737.35	\$ 0.00	\$ 0.00
	Employee + 1 Dependent					\$ 1,474.70	\$ 0.00	\$ 0.00
	Employee + 2 or more					\$ 1,917.11	\$ 0.00	\$ 0.00
WESTERN HEALTH ADVANTAGE (Restricted to Bay Area, Sacramento, and other Northern regions)	Employee Only	176	\$ 757.02	\$ 0.00	\$ 0.00	\$ 741.26	\$ 0.00	\$ 0.00
	Employee + 1 Dependent		\$1,514.04	\$ 0.00	\$ 0.00	\$1,482.52	\$ 0.00	\$ 0.00
	Employee + 2 or more		\$1,968.25	\$ 31.25	\$ 11.25	\$1,927.28	\$ 0.00	\$ 0.00
CSU Contribution (per Gov't Code):	2022							
*	All Units (except Unit 6)	Unit 6						
Employee Only	\$ 816	\$ 821						
Employee +1 Dependent	\$ 1,548	\$ 1,558						
Employee +2 or more Dependents	\$ 1,983	\$ 2,003						

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

NEW Health Plans effective January 1, 2022

Rev. 8/2021