

CalPERS Health Monthly Premiums for Contracting Agencies - Region 1

<p>Effective 01/01/25, the County maximum monthly contribution is:</p> <p>Units 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 16X, 17, 18, 19, 30, and Unrepresented Managers (Legislative - Unit 60, Executive - Unit 61, and Senior - Unit 62) is \$2,314.83</p> <p>Extra Help Units 00, 82, 87, 89, and 90 is \$1,851.86</p>	<p>Employees who elect Employee Only coverage, will receive no more than \$334.58 per month as cash back.</p> <p>Employees who Waive coverage will receive no more than \$342.00 per month as cash back.</p> <hr/> <p style="text-align: center;">Contributions are subject to change if a new/successor MOU is ratified with changes to County contribution</p>	<p>Bargaining Units 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 16X, 17, 18, 19, 30, and Unrepresented Managers (Legislative - Unit 60, Executive - Unit 61, and Senior - Unit 62) who elect Employee Plus Two or More Coverage receive a \$50.00/month supplemental County contribution into the cafeteria plan.</p>
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Plan	2025 (Region #1)						2024 (Region #1)					
	Single	Plan Code	2-Party	Plan Code	Family	Plan Code	Single	Plan Code	2-Party	Plan Code	Family	Plan Code
Anthem HMO Select *	\$ 1,256.65	5061	\$2,513.30	5062	\$ 3,267.29	5063	\$ 1,138.86	5061	\$ 2,277.72	5062	\$ 2,961.04	5063
Anthem HMO Traditional	\$ 1,500.40	5091	\$ 3,000.80	5092	\$ 3,901.04	5093	\$ 1,339.70	5091	\$ 2,679.40	5092	\$ 3,483.22	5093
Anthem EPO Del Norte *	N/A		N/A		N/A		\$ 1,314.27	5041	\$ 2,628.54	5042	\$ 3,417.10	5043
Blue Shield Access+ HMO	\$ 1,170.17	5251	\$ 2,340.34	5252	\$ 3,042.44	5253	\$ 1,076.84	5251	\$ 2,153.68	5252	\$ 2,799.78	5253
Blue Shield Trio * HMO	\$ 1,134.79	4511	\$ 2,269.58	4512	\$ 2,950.45	4513	\$ 946.84	4511	\$ 1,893.68	4512	\$ 2,461.78	4513
Kaiser Permanente	\$ 1,112.90	5331	\$ 2,225.80	5332	\$ 2,893.54	5333	\$ 1,021.41	5331	\$ 2,042.82	5332	\$ 2,655.67	5333
UnitedHealthcare Alliance	\$ 1,184.58	5761	\$ 2,369.16	5762	\$ 3,079.91	5763	\$ 1,091.13	5761	\$ 2,182.26	5762	\$ 2,836.94	5763
UnitedHealthcare Harmony **	\$ 1,005.02	4951	\$ 2,010.04	4952	\$ 2,613.05	4953	\$ 937.39	4951	\$ 1,874.78	4952	\$ 2,437.21	4953
Western Health Advantage HMO	\$ 914.27	5911	\$ 1,828.54	5912	\$ 2,377.10	5913	\$ 807.23	5911	\$ 1,614.46	5912	\$ 2,098.80	5913
PERS Gold PPO	\$ 1,013.70	6481	\$ 2,027.40	6482	\$ 2,635.62	6483	\$ 914.82	6131	\$ 1,829.64	6132	\$ 2,378.53	6133
PERS Platinum PPO	\$ 1,476.10	6571	\$ 2,952.20	6572	\$ 3,837.86	6573	\$ 1,314.27	6011	\$ 2,628.54	6012	\$ 3,417.10	6013
PORAC	\$ 975.00	5921	\$ 2,218.00	5922	\$ 2,777.00	5923	\$ 931.00	5921	\$ 2,117.00	5922	\$ 2,651.00	5923

** Plan not available in Solano County*

- Anthem HMO Select** is available in Alameda, Contra Costa, El Dorado, Monterey, Placer, Sacramento, San Francisco, San Joaquin, Santa Clara, Santa Cruz, and Stanislaus Counties
- Anthem EPO Del Norte** is only available in Del Norte County
- Blue Shield Access+** is **NOT** available in Napa County
- Blue Shield Trio** is only available in Butte, Contra Costa, El Dorado, Kern, Kings, Monterey, Nevada, Placer, Sacramento, Santa Cruz, Shasta, Stanislaus, Tulare, and Yolo Counties
- Blue Shield EPO** is only available in Alpine, Calaveras, Colusa, Inyo, Lake, Lassen, Mendocino, Modoc, Mono, Plumas, Shasta, Sierra, Siskiyou, Tehama, Trinity, and Tuolumne Counties
- UnitedHealthcare SignatueValue Alliance** is available in Alameda, Contra Costa, El Dorado, Marin, Merced, Placer, Sacramento, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, **Solano**, Sonoma, Stanislaus, and Yolo Counties
- UnitedHealthcare SignatureValue Harmony **** is **only** available in Contra Costa, Napa, Santa Clara, Santa Cruz, and Solano (zip codes 94510 and 94591) Counties
- Western Health Advantage** is available in El Dorado, Humboldt, Marin, Napa, Placer, Sacramento, **Solano**, Sonoma, and Yolo Counties