

# CalPERS 2023 Regional Health Premiums (Actives and Annuitants)

Effective Date: January 1, 2023

## Region 3

Los Angeles, Riverside, San Bernardino

### Basic Monthly Premiums (B)

Plan	Subscriber	Plan Code	Party Code	Party Rate	Subscriber & 1 Dependent	Plan Code	Party Code	Party Rate	Subscriber & 2+ Dependents	Plan Code	Party Code	Party Rate
Anthem Blue Cross Select HMO	\$737.91	508	1	1	\$1,475.82	508	2	2	\$1,918.57	508	3	3
Anthem Blue Cross Traditional HMO	942.73	511	1	1	1,885.46	511	2	2	2,451.10	511	3	3
Blue Shield Access+ HMO	738.29	527	1	1	1,476.58	527	2	2	1,919.55	527	3	3
Blue Shield Trio HMO*	661.49	452	1	1	1,322.98	452	2	2	1,719.87	452	3	3
Health Net Salud y Más	606.34	532	1	1	1,212.68	532	2	2	1,576.48	532	3	3
Health Net SmartCare	755.29	530	1	1	1,510.58	530	2	2	1,963.75	530	3	3
Kaiser Permanente	754.64	535	1	1	1,509.28	535	2	2	1,962.06	535	3	3
Peace Officers Research Assoc of CA	820.00	594	1	1	1,600.00	594	2	2	2,100.00	594	3	3
PERS Gold	680.37	615	1	1	1,360.74	615	2	2	1,768.96	615	3	3
PERS Platinum	992.59	603	1	1	1,985.18	603	2	2	2,580.73	603	3	3
UnitedHealthcare SignatureValue Alliance	790.46	578	1	1	1,580.92	578	2	2	2,055.20	578	3	3
UnitedHealthcare SignatureValue Harmony	713.55	475	1	1	1,427.10	475	2	2	1,855.23	475	3	3

### Supplement/Managed Medicare Monthly Premiums (M)

Plan	Subscriber	Plan Code	Party Code	Party Rate	Subscriber & 1 Dependent	Plan Code	Party Code	Party Rate	Subscriber & 2+ Dependents	Plan Code	Party Code	Party Rate
Anthem Medicare Preferred PPO	\$413.59	517	1	4	\$827.18	517	2	5	\$1,240.77	517	3	6
Anthem Medicare Preferred PPO with Dental/Vision <sup>1</sup>	413.59	514	1	4	827.18	514	2	5	1,240.77	514	3	6
Anthem Medicare Preferred PPO	413.59	039	1	4	827.18	039	2	5	1,240.77	039	3	6
Anthem Medicare Preferred PPO with Dental/Vision <sup>1</sup>	413.59	075	1	4	827.18	075	2	5	1,240.77	075	3	6
Blue Shield Medicare PPO	361.90	014	1	4	723.80	014	2	5	1,085.70	014	3	6
Blue Shield Medicare PPO with Dental/Vision <sup>2</sup>	361.90	047	1	4	723.80	047	2	5	1,085.70	047	3	6
Kaiser Permanente Senior Advantage	283.25	538	1	4	566.50	538	2	5	849.75	538	3	6
Kaiser Permanente Senior Advantage with Dental <sup>3</sup>	283.25	544	1	4	566.50	544	2	5	849.75	544	3	6
Kaiser Permanente Senior Advantage Summit	336.29	632	1	4	672.58	632	2	5	1,008.87	632	3	6
Kaiser Permanente Senior Advantage Summit with Dental <sup>3</sup>	336.29	638	1	4	672.58	638	2	5	1,008.87	638	3	6
Peace Officers Research Assoc of CA Medicare Supplement	465.00	597	1	4	1,030.00	597	2	5	1,395.00	597	3	6
PERS Gold Medicare Supplement	392.71	618	1	4	785.42	618	2	5	1,178.13	618	3	6
PERS Platinum Medicare Supplement	420.02	607	1	4	840.04	607	2	5	1,260.06	607	3	6
UnitedHealthcare Group Medicare Advantage PPO	299.68	581	1	4	599.36	581	2	5	899.04	581	3	6
UnitedHealthcare Group Medicare Advantage Edge PPO	357.70	623	1	4	715.40	623	2	5	1,073.10	623	3	6
UnitedHealthcare Group Medicare Advantage PPO with Dental/Vision <sup>4</sup>	299.68	587	1	4	599.36	587	2	5	899.04	587	3	6

\*Blue Shield Trio is only available in Los Angeles, Riverside, San Bernardino.

<sup>1</sup>Dental and Vision coverage is an additional \$38.00 per member per month premium. You will be billed directly for this amount.

<sup>2</sup>Dental and Vision coverage is an additional \$38.00 per member per month premium. You will be billed directly for this amount.

<sup>3</sup>Dental benefit is an additional \$15.35 per member per month premium. You will be billed directly for this amount.

<sup>4</sup>Dental and Vision coverage is an additional \$26.03 per member per month premium. You will be billed directly for this amount.

# CalPERS 2023 Regional Health Premiums (Actives and Annuitants)

Effective Date: January 1, 2023

## Region 3

Los Angeles, Riverside, San Bernardino

### Combination Monthly Premiums

Plan	Subscriber in M, & 1 Dependent in B	Plan Code	Party Code	Party Rate	Subscriber in M, & 2+ Dependents in B	Plan Code	Party Code	Party Rate	Subscriber in M, & 1+ Dependent in M, & 1+ Dependent in B	Plan Code	Party Code	Party Rate
Anthem Blue Cross Select HMO and Medicare Preferred	\$1,151.50	041	4	7	\$1,594.25	041	5	8	\$1,269.93	041	6	9
Anthem Blue Cross Select HMO and Medicare Preferred with Dental/Vision <sup>1</sup>	1,151.50	077	4	7	1,594.25	077	5	8	1,269.93	077	6	9
Anthem Blue Cross Traditional HMO and Medicare Preferred	1,356.32	520	4	7	1,921.96	520	5	8	1,392.82	520	6	9
Anthem Blue Cross Traditional HMO and Medicare Preferred with Dental/Vision <sup>1</sup>	1,356.32	523	4	7	1,921.96	523	5	8	1,392.82	523	6	9
Blue Shield Access+ HMO and Medicare	1,100.19	051	4	7	1,543.16	051	5	8	1,166.77	051	6	9
Blue Shield Access+ HMO and Medicare with Dental/Vision <sup>2</sup>	1,100.19	091	4	7	1,543.16	091	5	8	1,166.77	091	6	9
Blue Shield Trio HMO and Medicare	1,023.39	096	4	7	1,420.28	096	5	8	1,120.69	096	6	9
Blue Shield Trio HMO and Medicare with Dental/Vision <sup>3</sup>	1,023.39	099	4	7	1,420.28	099	5	8	1,120.69	099	6	9
Kaiser Permanente and Senior Advantage	1,037.89	541	4	7	1,490.67	541	5	8	1,019.28	541	6	9
Kaiser Permanente and Senior Advantage with Dental <sup>4</sup>	1,037.89	547	4	7	1,490.67	547	5	8	1,019.28	547	6	9
Kaiser Permanente and Senior Advantage Summit	1,090.93	635	4	7	1,543.71	635	5	8	1,125.36	635	6	9
Kaiser Permanente and Senior Advantage Summit with Dental <sup>4</sup>	1,090.93	641	4	7	1,543.71	641	5	8	1,125.36	641	6	9
Peace Officers Research Assoc of CA and Medicare Supplement	1,368.00	600	4	7	1,888.00	600	5	8	1,687.00	600	6	9
PERS Gold and Medicare Supplement	1,073.08	621	4	7	1,481.30	621	5	8	1,193.64	621	6	9
PERS Platinum and Medicare Supplement	1,412.61	611	4	7	2,008.16	611	5	8	1,435.59	611	6	9
UnitedHealthcare SignatureValue Alliance and Group Medicare Advantage PPO	1,090.14	584	4	7	1,564.42	584	5	8	1,073.64	584	6	9
UnitedHealthcare SignatureValue Alliance and Group Medicare Advantage Edge PPO	1,148.16	629	4	7	1,622.44	629	5	8	1,189.68	629	6	9
UnitedHealthcare SignatureValue Alliance and Group Medicare Advantage PPO with Dental/Vision <sup>5</sup>	1,090.14	590	4	7	1,564.42	590	5	8	1,073.64	590	6	9
UnitedHealthcare SignatureValue Harmony and Group Medicare Advantage PPO	1,013.23	774	4	7	1,441.36	774	5	8	1,027.49	774	6	9
UnitedHealthcare SignatureValue Harmony and Group Medicare Advantage Edge PPO	1,071.25	626	4	7	1,499.38	626	5	8	1,143.53	626	6	9
UnitedHealthcare SignatureValue Harmony and Group Medicare Advantage PPO with Dental/Vision <sup>5</sup>	1,013.23	776	4	7	1,441.36	776	5	8	1,027.49	776	6	9

<sup>1</sup>Dental and Vision coverage is an additional \$38.00 per member per month premium. You will be billed directly for this amount.

<sup>2</sup>Dental and Vision coverage is an additional \$38.00 per member per month premium. You will be billed directly for this amount.

<sup>3</sup>Dental and Vision coverage is an additional \$38.00 per member per month premium. You will be billed directly for this amount.

<sup>4</sup>Dental benefit is an additional \$15.35 per member per month premium. You will be billed directly for this amount.

<sup>5</sup>Dental and Vision coverage is an additional \$26.03 per member per month premium. You will be billed directly for this amount.

# CalPERS 2023 Regional Health Premiums (Actives and Annuitants)

Effective Date: January 1, 2023

## Region 3

Los Angeles, Riverside, San Bernardino

### Combination Monthly Premiums (Continued)

Plan	Subscriber in B, & 1 Dependent in M	Plan Code	Party Code	Party Rate	Subscriber in B, & 2+ Dependents in M	Plan Code	Party Code	Party Rate	Subscriber in B, 1 Dependent in M, & 1+ Dependent in B	Plan Code	Party Code	Party Rate
Anthem Blue Cross Select HMO and Medicare Preferred	\$1,151.50	041	7	10	\$1,565.09	041	8	11	\$1,594.25	041	9	12
Anthem Blue Cross Select HMO and Medicare Preferred with Dental/Vision <sup>1</sup>	1,151.50	077	7	10	1,565.09	077	8	11	1,594.25	077	9	12
Anthem Blue Cross Traditional HMO and Medicare Preferred	1,356.32	520	7	10	1,769.91	520	8	11	1,921.96	520	9	12
Anthem Blue Cross Traditional HMO and Medicare Preferred with Dental/Vision <sup>1</sup>	1,356.32	523	7	10	1,769.91	523	8	11	1,921.96	523	9	12
Blue Shield Access+ HMO and Medicare	1,100.19	051	7	10	1,462.09	051	8	11	1,543.16	051	9	12
Blue Shield Access+ HMO and Medicare with Dental/Vision <sup>2</sup>	1,100.19	091	7	10	1,462.09	091	8	11	1,543.16	091	9	12
Blue Shield Trio HMO and Medicare	1,023.39	096	7	10	1,385.29	096	8	11	1,420.28	096	9	12
Blue Shield Trio HMO and Medicare with Dental/Vision <sup>3</sup>	1,023.39	099	7	10	1,385.29	099	8	11	1,420.28	099	9	12
Kaiser Permanente and Senior Advantage	1,037.89	541	7	10	1,321.14	541	8	11	1,490.67	541	9	12
Kaiser Permanente and Senior Advantage with Dental <sup>4</sup>	1,037.89	547	7	10	1,321.14	547	8	11	1,490.67	547	9	12
Kaiser Permanente and Senior Advantage Summit	1,090.93	635	7	10	1,427.22	635	8	11	1,543.71	635	9	12
Kaiser Permanente and Senior Advantage Summit with Dental <sup>4</sup>	1,090.93	641	7	10	1,427.22	641	8	11	1,543.71	641	9	12
Peace Officers Research Assoc of CA and Medicare Supplement	1,363.00	600	7	10	1,825.00	600	8	11	1,773.00	600	9	12
PERS Gold and Medicare Supplement	1,073.08	621	7	10	1,465.79	621	8	11	1,481.30	621	9	12
PERS Platinum and Medicare Supplement	1,412.61	611	7	10	1,832.63	611	8	11	2,008.16	611	9	12
UnitedHealthcare SignatureValue Alliance and Group Medicare Advantage PPO	1,090.14	584	7	10	1,389.82	584	8	11	1,564.42	584	9	12
UnitedHealthcare SignatureValue Alliance and Group Medicare Advantage Edge PPO	1,148.16	629	7	10	1,505.86	629	8	11	1,622.44	629	9	12
UnitedHealthcare SignatureValue Alliance and Group Medicare Advantage PPO with Dental/Vision <sup>5</sup>	1,090.14	590	7	10	1,389.82	590	8	11	1,564.42	590	9	12
UnitedHealthcare SignatureValue Harmony and Group Medicare Advantage PPO	1,013.23	774	7	10	1,312.91	774	8	11	1,441.36	774	9	12
UnitedHealthcare SignatureValue Harmony and Group Medicare Advantage Edge PPO	1,071.25	626	7	10	1,428.95	626	8	11	1,499.38	626	9	12
UnitedHealthcare SignatureValue Harmony and Group Medicare Advantage PPO with Dental/Vision <sup>5</sup>	1,013.23	776	7	10	1,312.91	776	8	11	1,441.36	776	9	12

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