

2022 Health Premium Rates

Region 1

Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Glenn, Humboldt, Lake, Lassen, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Placer, Plumas, Sacramento, San Benito, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Stanislaus, Sutter, Tehama, Trinity, Tuolumne, Yolo, and Yuba

Basic Plan Rates				Medicare Plan Rates *			
Plan Name	Single	2 Party	Family	Plan Name	Single	2 Party	Family
Anthem Select HMO	\$1,015.81	\$2,031.62	\$2,641.11	Anthem Medicare Preferred	\$360.19	\$720.38	\$1,080.57
Anthem Traditional HMO	\$1,304.00	\$2,608.00	\$3,390.40				
Blue Shield Access +	\$1,116.01	\$2,232.02	\$2,901.63	Blue Shield Medicare PPO	\$353.11	\$706.22	\$1,059.33
Blue Shield Trio HMO	\$898.54	\$1,797.08	\$2,336.20				
Health Net SmartCare HMO	\$1,153.00	\$2,306.00	\$2,997.80				
Kaiser Permanente HMO*	\$857.06	\$1,714.12	\$2,228.36	Kaiser Senior Advantage	\$302.53	\$605.06	\$907.59
Western Health Advantage*	\$741.26	\$1,482.52	\$1,927.28	Western Health Advantage	\$314.94	\$629.88	\$944.82
UnitedHealth Care	\$1,020.28	\$2,040.56	\$2,652.73	UnitedHealthcare Group	\$294.65	\$589.30	\$883.95
				UnitedHealthcare Edge	\$347.21	\$694.42	\$1,041.63
Anthem EPO Del Norte*	\$1,057.01	\$2,114.02	\$2,748.23				
PERS Platinum	\$1,057.01	\$2,114.02	\$2,748.23	PERS Platinum Medicare Supplement	\$381.94	\$763.88	\$1,145.82
PERS Gold	\$701.23	\$1,402.46	\$1,823.20	PERS Gold PPO Medicare Supplement	\$377.41	\$754.82	\$1,132.23
PORAC Region 1	\$799.00	\$1,725.00	\$2,219.00	PORAC Region 1 Med Supp	\$461.00	\$919.00	\$1,471.00

Region 2

Fresno, Imperial, Inyo, Kern, Kings, Madera, Orange, San Diego, San Luis Obispo, Santa Barbara, Tulare, Ventura

Basic Plan Rates				Medicare Plan Rates *			
Plan Name	Single	2 Party	Family	Plan Name	Single	2 Party	Family
Anthem HMO Select	\$712.43	\$1,424.86	\$1,852.32	Anthem Medicare Preferred	\$360.19	\$720.38	\$1,080.57
Anthem HMO Traditional	\$1,007.13	\$2,014.26	\$2,618.54				
Blue Shield Access +	\$900.22	\$1,800.44	\$2,340.57	Blue Shield Medicare PPO	\$353.11	\$706.22	\$1,059.33
Blue Shield Trio	\$742.70	\$1,485.40	\$1,931.02				
Health Net Salud y Más	\$548.26	\$1,096.52	\$1,425.48				
Health Net SmartCare	\$845.69	\$1,691.38	\$2,198.79				
Kaiser Permanente*	\$706.02	\$1,412.04	\$1,835.65	Kaiser Senior Advantage*	\$302.53	\$605.06	\$907.59
PERS Platinum	\$882.18	\$1,764.36	\$2,293.67	PERS Platinum Medicare Supplement	\$381.94	\$763.88	\$1,145.82
PERS Gold	\$587.78	\$1,175.56	\$1,528.23	PERS Gold Medicare Supplement	\$377.41	\$754.82	\$1,132.23
PORAC Region 2	\$775.00	\$1,550.00	\$2,010.00	PORAC Region 2 Med Supp	\$461.00	\$919.00	\$1,471.00
Sharp HMO*	\$699.21	\$1,398.42	\$1,817.95	Sharp Direct Advantage Medicare Supplement*	\$263.85	\$527.70	\$791.55
UnitedHealthcare Alliance HMO	\$755.09	\$1,550.18	\$2,015.23	UnitedHealthcare Group Medicare Supplement	\$294.65	\$589.30	\$883.95
UnitedHealthcare Harmony HMO	\$782.74	\$1,565.48	\$2,035.12	UnitedHealthcare Edge Medicare Supplement	\$347.21	\$694.42	\$1,041.63

Region 3

Los Angeles, Riverside, San Bernardino

Basic Plan Rates				Medicare Plan Rates *			
Plan Name	Single	2 Party	Family	Plan Name	Single	2 Party	Family
Anthem HMO Select	\$676.48	\$1,352.96	\$1,758.85	Anthem Medicare Preferred	\$360.19	\$720.38	\$1,080.57
Anthem HMO Traditional	\$935.57	\$1,871.14	\$2,432.48				
Blue Shield Access +	\$779.87	\$1,559.74	\$2,027.66	Blue Shield Medicare PPO	\$353.11	\$706.22	\$1,059.33
Blue Shield Trio	\$668.13	\$1,336.26	\$1,737.14				
Health Net Salud y Más	\$463.87	\$927.74	\$1,206.06				
Health Net SmartCare	\$764.96	\$1,529.92	\$1,988.90				
Kaiser Permanente*	\$719.78	\$1,439.56	\$1,871.43	Kaiser Senior Advantage*	\$302.53	\$605.06	\$907.59
PERS Platinum	\$863.37	\$1,726.74	\$2,244.76	PERS Platinum Medicare Supplement	\$381.94	\$763.88	\$1,145.82
PERS Gold	\$575.56	\$1,151.12	\$1,496.46	PERS Gold Medicare Supplement	\$377.41	\$754.82	\$1,132.23
PORAC Region 3	\$775.00	\$1,475.00	\$1,894.00	PORAC Region 3 Medicare Supp	\$461.00	\$919.00	\$1,471.00
UnitedHealthcareAlliance HMO	\$771.85	\$1,543.70	\$2,006.81	UnitedHealthcare Group Medicare Supplement	\$294.65	\$589.30	\$883.95
UnitedHealthcare Harmony HMO	\$714.28	\$1,428.56	\$1,857.13	UnitedHealthcare Edge Medicare Supplement	\$347.21	\$694.42	\$1,041.63

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Out of State Region							
Basic Plan Rates				Medicare Plan Rates *			
Plan Name	Single	2 Party	Family	Plan Name	Single	2 Party	Family
Kaiser*	\$1,138.95	\$2,277.90	\$2,961.27	Kaiser**	\$295.52	\$591.04	\$886.56
PERS Platinum	\$847.71	\$1,695.42	\$2,204.05	PERS Platinum Medicare Supplement	\$381.94	\$763.88	\$1,145.82
PORAC	\$899.00	\$1,899.00	\$2,223.00	PORAC Med Supp	\$461.00	\$919.00	\$1,471.00
Medicare Combination Plans							
Retiree Enrolled in Medicare & Dependents in Basic Plan				Retiree Enrolled in Basic Plan & Dependent Enrolled in Medicare			
Plan Name	1 Dep.	2 Depts	1 Dept in Med & 1 in Basic	Plan Name	1 Dep.	2 Depts	1 Dept in Med & 1 in Basic
Anthem Select HMO	\$1,208.27	\$1,717.12	\$1,229.23	Anthem Select HMO	\$1,208.27	\$1,568.46	\$1,717.12
Anthem Traditional HMO	\$1,558.26	\$2,277.10	\$1,439.22	Anthem Traditional HMO	\$1,558.26	\$1,918.45	\$2,277.10
Blue Shield Access+ HMO	\$1,253.33	\$1,793.46	\$1,246.35	Blue Shield Access+ HMO	\$1,253.33	\$1,606.44	\$1,793.46
Blue Shield Trio HMO	\$1,095.81	\$1,541.43	\$1,151.84	Blue Shield Trio HMO	\$1,095.81	\$1,448.92	\$1,541.43
Kaiser Senior Advantage*	\$1,107.20	\$1,590.00	\$1,087.86	Kaiser Senior Advantage	\$1,107.20	\$1,409.73	\$1,590.00
Kaiser Out of State*	\$1,434.47	\$2,117.84	\$1,274.41	Kaiser Out of State	\$1,434.47	\$1,729.99	\$2,117.84
Sharp Direct Advantage*	\$963.06	\$1,382.59	\$947.23	Sharp Direct Advantage	\$963.06	\$1,226.91	\$1,382.59
UnitedHealthcare Alliance Group	\$1,112.68	\$1,603.50	\$1,080.12	UnitedHealthcare Alliance Group	\$1,112.68	\$1,407.33	\$1,603.50
UnitedHealthcare Edge	\$1,165.24	\$1,656.06	\$1,185.24	UnitedHealthcare Edge	\$1,165.24	\$1,512.45	\$1,656.06
UnitedHealthcare Harmony Group	\$1,032.00	\$1,474.41	\$1,031.71	UnitedHealthcare Harmony Group	\$1,032.00	\$1,326.65	\$1,474.41
UnitedHealthcare Harmony Edge	\$1,084.56	\$1,526.97	\$1,136.83	UnitedHealthcare Harmony Edge	\$1,084.56	\$1,431.77	\$1,526.97
Western Health Advantage*	\$1,056.20	\$1,500.96	\$1,074.64	Western Health Advantage	\$1,056.20	\$1,371.14	\$1,500.96
PERS Platinum PPO	\$1,328.72	\$1,896.79	\$1,331.95	PERS Platinum PPO	\$1,328.72	\$1,710.66	\$1,896.79
PERS Gold PPO	\$1,027.79	\$1,418.02	\$1,145.05	PERS Gold PPO	\$1,027.79	\$1,405.20	\$1,418.02
PORAC Region 1	\$1,439.00	\$1,913.00	\$1,496.00	PORAC Region 1	\$1,308.00	\$1,825.00	\$1,782.00
PORAC Region 2	\$1,351.00	\$1,835.00	\$1,582.00	PORAC Region 2	\$1,346.00	\$1,800.00	\$1,830.00
PORAC Region 3	\$1,273.00	\$1,793.00	\$1,592.00	PORAC Region 3	\$1,268.00	\$1,847.00	\$1,678.00
PORAC Out of State	\$1,461.00	\$1,886.00	\$1,444.00	PORAC Out of State	\$1,461.00	\$1,974.00	\$1,830.00
City of Newport Beach Dental & Vision Rates							
Plan Name	Single	2 Party	Family				
MetLife HMO	\$14.03	\$26.65	\$37.17	<i>HMO plan is only available in California</i> <i>\$3,000 annual maximum. Available to Retirees in & out of California</i> <i>\$1,000 annual maximum. Only available to Retirees out of California</i>			
MetLife PPO, High Plan	\$54.57	\$111.04	\$152.69				
MetLife PPO, Low Plan	\$37.12	\$72.33	\$122.41				
MetLife Vision PPO	\$8.76	\$16.79	\$23.99				

Contact CalPERS for More Information on Enrollment, Rates and Dental/Vision plan options at 888-225-7377 or www.calpers.ca.gov

Monthly contribution toward premium for 2022 is \$149.00

* Not available in all Regions. Check the Chart for availability.