

2024 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	\$1,138.86	\$2,277.72	\$2,961.04	Anthem Medicare Preferred	\$405.83	\$811.66	\$1,217.49
Anthem Traditional HMO	\$1,339.70	\$2,679.40	\$3,483.22				
Anthem EPO Del Norte*	\$1,314.27	\$2,628.54	\$3,417.10				
Blue Shield Access + HMO	\$1,076.84	\$2,153.68	\$2,799.78	Blue Shield Medicare PPO	\$392.68	\$785.36	\$1,178.04
Blue Shield Trio HMO*	\$946.84	\$1,893.68	\$2,461.78				
Kaiser Permanente HMO	\$1,021.41	\$2,042.82	\$2,655.67	Kaiser Senior Advantage	\$324.79	\$649.58	\$974.37
				Kaiser Senior Advantage Summit	\$386.55	\$773.10	\$1,159.65
Western Health Advantage	\$807.23	\$1,614.46	\$2,098.80	Western Health Advant. Mycare Select HMO	\$268.62	\$537.24	\$805.86
UnitedHealthcare Alliance HMO	\$1,091.13	\$2,182.26	\$2,836.94	UnitedHealthcare Group Advantage PPO	\$341.72	\$683.44	\$1,025.16
UnitedHealthcare Harmony HMO	\$937.39	\$1,874.78	\$2,437.21	UnitedHealthcare Advantage Edge PPO	\$366.01	\$732.02	\$1,098.03
PERS Platinum	\$1,314.27	\$2,628.54	\$3,417.10	PERS Platinum Medicare Supplement	\$448.15	\$896.30	\$1,344.45
PERS Gold	\$914.82	\$1,829.64	\$2,378.53	PERS Gold Medicare Supplement	\$406.60	\$813.20	\$1,219.80
PORAC	\$931.00	\$2,117.00	\$2,651.00	PORAC Medicare Supplement	\$465.00	\$1,030.00	\$1,395.00

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 Select HMO	\$807.71	\$1,615.42	\$2,100.05	Anthem Medicare Preferred PPO	\$405.83	\$811.66	\$1,217.49
Anthem Traditional HMO	\$1,034.38	\$2,068.76	\$2,689.39				
Blue Shield Access + HMO	\$869.14	\$1,738.28	\$2,259.76	Blue Shield Medicare PPO	\$392.68	\$785.36	\$1,178.04
Blue Shield Access + EPO*	\$869.14	\$1,738.28	\$2,259.76				
Blue Shield Trio*	\$810.24	\$1,620.48	\$2,106.62				
Health Net Salud y Más	\$684.77	\$1,369.54	\$1,780.40				
Kaiser Permanente	\$904.95	\$1,809.90	\$2,352.87	Kaiser Senior Advantage	\$324.79	\$649.58	\$974.37
				Kaiser Senior Advantage Summit	\$386.55	\$773.10	\$1,159.65
PERS Platinum	\$1,151.50	\$2,303.00	\$2,993.90	PERS Platinum Medicare Supplement	\$448.15	\$896.30	\$1,344.45
PERS Gold	\$799.44	\$1,598.88	\$2,078.54	PERS Gold Medicare Supplement	\$406.60	\$813.20	\$1,219.80
PORAC	\$926.00	\$1,863.00	\$2,371.00	PORAC Medicare Supplement	\$465.00	\$1,030.00	\$1,395.00
Sharp HMO*	\$833.24	\$1,666.48	\$2,166.42	Sharp Direct Advant. Medicare Supplement*	\$256.53	\$513.06	\$769.59
UnitedHealthcare Alliance HMO	\$837.88	\$1,675.76	\$2,178.49	UnitedHealthcare Grp Medicare Advant. PPO	\$341.72	\$683.44	\$1,025.16
UnitedHealthcare Harmony HMO	\$792.65	\$1,585.30	\$2,060.89	UnitedHealthcare Grp Edge Med Advant. PPO	\$366.01	\$732.02	\$1,098.03

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 Select HMO	\$841.13	\$1,682.26	\$2,186.94	Anthem Medicare Preferred PPO	\$405.83	\$811.66	\$1,217.49
Anthem Traditional HMO	\$1,012.67	\$2,025.34	\$2,632.94				
Blue Shield Access + HMO	\$756.65	\$1,513.30	\$1,967.29	Blue Shield Medicare PPO	\$392.68	\$785.36	\$1,178.04
Blue Shield Trio* HMO	\$704.69	\$1,409.38	\$1,832.19				
Health Net Salud y Más	\$630.13	\$1,260.26	\$1,638.34				
Kaiser Permanente	\$865.41	\$1,730.82	\$2,250.07	Kaiser Senior Advantage	\$324.79	\$649.58	\$974.37
				Kaiser Senior Advantage Summit	\$386.55	\$773.10	\$1,159.65
PERS Platinum	\$1,131.47	\$2,262.94	\$2,941.82	PERS Platinum Medicare Supplement	\$448.15	\$896.30	\$1,344.45
PERS Gold	\$785.28	\$1,570.56	\$2,041.73	PERS Gold Medicare Supplement	\$406.60	\$813.20	\$1,219.80
PORAC	\$926.00	\$1,863.00	\$2,371.00	PORAC Medicare Supplement	\$465.00	\$1,030.00	\$1,395.00

2024 Health Premium Rates

UnitedHealthcare Alliance	\$826.44	\$1,652.88	\$2,148.74	UnitedHealthcare Grp Medicare Advant. PPO	\$341.72	\$683.44	\$1,025.16
UnitedHealthcare Harmony	\$734.76	\$1,469.52	\$1,910.38	UnitedHealthcare Grp Edge Med Advant. PPO	\$366.01	\$732.02	\$1,098.03

Out of State Region

Basic Plan Rates				Medicare Plan Rates **			
Plan Name	Single	2 Party	Family	Plan Name	Single	2 Party	Family
				Blue Shield Medicare PPO	\$392.68	\$785.36	\$1,178.04
				UnitedHealthcare Grp Medicare Advant. PPO	\$341.72	\$683.44	\$1,025.16
				UnitedHealthcare Grp Edge Med Advant. PPO	\$366.01	\$732.02	\$1,098.30
Kaiser*	\$1,312.45	\$2,624.90	\$3,412.37	Kaiser Senior Advantage*	\$318.43	\$636.86	\$955.29
				Kaiser Senior Advantage Summit Out of State	\$380.21	\$760.42	\$1,140.63
PERS Platinum	\$1,146.86	\$2,293.72	\$2,981.84	PERS Platinum Medicare Supplement	\$448.15	\$896.30	\$1,219.80
PORAC	\$1,056.00	\$2,144.00	\$2,540.00	PORAC Med Supp	\$465.00	\$1,030.00	\$1,395.00

City of Newport Beach Dental & Vision Rates

Plan Name	Single	2 Party	Family				
Delta HMO	\$16.11	\$30.59	\$42.67	HMO plan is only available in California			
Delta PPO, High Plan	\$55.25	\$112.42	\$154.58	\$3,000 annual maximum. Available to Retirees in & out of California			
Delta PPO, Low Plan	\$35.79	\$69.74	\$118.03	\$1,000 annual maximum. Only available to Retirees out of California			
VSP Vision PPO	\$8.92	\$17.83	\$28.71	Available in and out of California			

* Not available in all Regions. Verify with CalPERS for plan availability in your area.

**Contact CalPERS for more information on enrollment, rates, Medicare combination plans, and dental/vision plan options at 888-225-7377 or

www.calpers.ca.gov

Monthly contribution toward premium for 2024 is \$157.00