Rates Effective 01/01/2023
Board of Trustees

Benefit Plan	Blue Shield Acess + HMO	Blue Shield Trio HMO	Blue Shield EPO	Western Health Advantage HMO	Kaiser HMO	PERS Gold PPO	PERS Platinum PPO	Anthem Select HMO	Anthem Tradtional HMO	Anthem EPO Del Norte EPO	United Healthcare HMO	HealthNet HMO	Medical Rebate
Medical Rate	$ 2,044.33	$ 1,755.47	$ 2,044.33	$ 1,501.18	$ 1,804.45	$ 1,630.41	$ 2,369.99	$ 2,229.21	$ 2,390.90	$ 2,369.99	$ 2,061.82	$ 2,319.40	N/A
Chiro	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	N/A
Vision	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50
Delta Dental	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00
Total Monthly Premium	$ 2,173.83	$ 1,884.97	$ 2,173.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,499.49	$ 2,358.71	$ 2,520.40	$ 2,499.49	$ 2,191.32	$ 2,448.90	$ 124.50
Total District Contributions **	$ 2,073.83	$ 1,884.97	$ 2,073.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,073.83	$ 2,073.83	$ 2,073.83	$ 2,073.83	$ 2,073.83	$ 2,073.83	$ 124.50
Monthly Buy-up													
12 month rate	**$ 100.00**	**$ -**	**$ 100.00**	**$ -**	**$ -**	**$ -**	**$ 425.66**	**$ 284.88**	**$ 446.58**	**$ 425.66**	**$ 117.50**	**$ 375.07**	**$ -**
11 month rate	**$ 109.09**	**$ -**	**$ 109.09**	**$ -**	**$ -**	**$ -**	**$ 464.36**	**$ 310.78**	**$ 487.17**	**$ 464.36**	**$ 128.18**	**$ 409.17**	**$ -**

**Medical Rebate ** **	
12 month rate	**$ 750.59**
11 month rate	**$ 818.83**

** BP 9250 - Benefits no greater than those received by non-safety employees with the most generous schedule (CSEA 318)

The Customer service numbers for the benefit providers are:

Blue Cross/Anthem/PERS HMO	**1-855-839-4524**	**website-www.anthem.com/ca/calpers**
Blue Cross/Anthem/PERS PPO	**1-877-737-7776**	**website-www.anthem.com/ca/calpers**
Blue Shield	**1-800-334-5847**	**website-www.blueshield.com**
Health Net	**1-800-522-0088**	**website-www.healthnet.com**
Kaiser	**1-800-464-4000**	**website-www.kp.org/calpers**
United Healthcare	**1-877-359-3714**	**website-www.uhc.com**
Western Health Advantage	**1-888-942-7377**	**website-www.westernhealth.com/calpers**
Delta Dental	**1-866-499-3001**	**website-www.deltadentalca.com**
EyeMed Vision	**1-866-804-0982**	**website-www.eyemed.com**
Optum Health Chiropractic	**1-800-428-6337**	**website-www.optum.com**

Rates Effective 01/01/2023
California Schools Employees Association, Unit 318

Benefit Plan	Blue Shield Acess + HMO	Blue Shield Trio HMO	Blue Shield EPO	Western Health Advantage HMO	Kaiser HMO	PERS Gold PPO	PERS Platinum PPO	Anthem Select HMO	Anthem Tradtional HMO	Anthem EPO Del Norte EPO	United Healthcare HMO	HealthNet HMO	Medical Rebate
Medical Rate	$ 2,044.33	$ 1,755.47	$ 2,044.33	$ 1,501.18	$ 1,804.45	$ 1,630.41	$ 2,369.99	$ 2,229.21	$ 2,390.90	$ 2,369.99	$ 2,061.82	$ 2,319.40	N/A
Chiro	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	N/A
Vision	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50
Delta Dental	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00
Total Monthly Premium	$ 2,173.83	$ 1,884.97	$ 2,173.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,499.49	$ 2,358.71	$ 2,520.40	$ 2,499.49	$ 2,191.32	$ 2,448.90	$ 124.50
Total District Contributions **	$ 2,073.83	$ 1,884.97	$ 2,073.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,073.83	$ 2,073.83	$ 2,073.83	$ 2,073.83	$ 2,073.83	$ 2,073.83	$ 124.50
Monthly Buy-up													
12 month rate	**$ 100.00**	**$ -**	**$ 100.00**	**$ -**	**$ -**	**$ -**	**$ 425.66**	**$ 284.88**	**$ 446.58**	**$ 425.66**	**$ 117.50**	**$ 375.07**	**$ -**
11 month rate	**$ 109.09**	**$ -**	**$ 109.09**	**$ -**	**$ -**	**$ -**	**$ 464.36**	**$ 310.78**	**$ 487.17**	**$ 464.36**	**$ 128.18**	**$ 409.17**	**$ -**

Medical Rebate * **	
12 month rate	**$ 750.59**
11 month rate	**$ 818.83**

** Effective 01/01/2006 Lowest Cost of Blue Shield Access - $100.00
Note: Plan Changed from HealthNet (HN) to Blue Shield Access after HN was no longer offered)
*** Effective 01/01/2003 50% of the Lowest Medical Plan Rate (Western Health Advantage HMO)

The Customer service numbers for the benefit providers are:

Blue Cross/Anthem/PERS HMO	**1-855-839-4524**	**website-www.anthem.com/ca/calpers**
Blue Cross/Anthem/PERS PPO	**1-877-737-7776**	**website-www.anthem.com/ca/calpers**
Blue Shield	**1-800-334-5847**	**website-www.blueshield.com**
Health Net	**1-800-522-0088**	**website-www.healthnet.com**
Kaiser	**1-800-464-4000**	**website-www.kp.org/calpers**
United Healthcare	**1-877-359-3714**	**website-www.uhc.com**
Western Health Advantage	**1-888-942-7377**	**website-www.westernhealth.com/calpers**
Delta Dental	**1-866-499-3001**	**website-www.deltadentalca.com**
EyeMed Vision	**1-866-804-0982**	**website-www.eyemed.com**
Optum Health Chiropractic	**1-800-428-6337**	**website-www.optum.com**

Rates Effective 01/01/2023
California Schools Employees Association, Unit 821

Benefit Plan	Blue Shield Access + HMO	Blue Shield Trio HMO	Blue Shield EPO	Western Health Advantage HMO	Kaiser HMO	PERS Gold PPO	PERS Platinum PPO	Anthem Select HMO	Anthem Traditional HMO	Anthem EPO Del Norte EPO	United HealthCare HMO	HealthNet HMO	Medical Rebate
Medical Rate	$ 2,044.33	$ 1,755.47	$ 2,044.33	$ 1,501.18	$ 1,804.45	$ 1,630.41	$ 2,369.99	$ 2,229.21	$ 2,390.90	$ 2,369.99	$ 2,061.82	$ 2,319.40	N/A
Chiro	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	N/A
Vision	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50
Delta Dental	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00
Total Monthly Premium	$ 2,173.83	$ 1,884.97	$ 2,173.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,499.49	$ 2,358.71	$ 2,520.40	$ 2,499.49	$ 2,191.32	$ 2,448.90	$ 124.50
Total District Contributions **	$ 1,729.30	$ 1,729.30	$ 1,729.30	$ 1,630.68	$ 1,729.30	$ 1,729.30	$ 1,729.30	$ 1,729.30	$ 1,729.30	$ 1,729.30	$ 1,729.30	$ 1,729.30	$ 124.50
Monthly Buy-up													
12 month rate	**$ 444.53**	**$ 155.67**	**$ 444.53**	**$ -**	**$ 204.65**	**$ 30.61**	**$ 770.19**	**$ 629.41**	**$ 791.10**	**$ 770.19**	**$ 462.02**	**$ 719.60**	**$ -**
11 month rate	**$ 484.94**	**$ 169.83**	**$ 484.94**	**$ -**	**$ 223.25**	**$ 33.39**	**$ 840.21**	**$ 686.63**	**$ 863.02**	**$ 840.21**	**$ 504.03**	**$ 785.02**	**$ -**

Medical Rebate for employees hired on or before 12/31/15 * **	
12 month rate	**$ 590.58**
11 month rate	**$ 644.27**

Medical Rebate for employees hired on or after 1/1/2016 ** **	
12 month rate	**$ 250.00**
11 month rate	**$ 272.73**

** Effective 01/01/2020 - Negotiated rate.
*** Effective 01/01/2018 - Negotiated fixed cap rate of $590.58 per month.
**** Effective 01/01/2018 - Negotiated fixed cap rate of $250.00 per month.

The Customer service numbers for the benefit providers are:

Blue Cross/Anthem/PERS HMO	**1-855-839-4524**	**website-www.anthem.com/ca/calpers**
Blue Cross/Anthem/PERS PPO	**1-877-737-7776**	**website-www.anthem.com/ca/calpers**
Blue Shield	**1-800-334-5847**	**website-www.blueshield.com**
Health Net	**1-800-522-0088**	**website-www.healthnet.com**
Kaiser	**1-800-464-4000**	**website-www.kp.org/calpers**
United Healthcare	**1-877-359-3714**	**website-www.uhc.com**
Western Health Advantage	**1-888-942-7377**	**website-www.westernhealth.com/calpers**
Delta Dental	**1-866-499-3001**	**website-www.deltadentalca.com**
EyeMed Vision	**1-866-804-0982**	**website-www.eyemed.com**
Optum Health Chiropractic	**1-800-428-6337**	**website-www.optum.com**

Rates Effective 01/01/2023
California Schools Employee Association Unit 885

Benefit Plan	Blue Shield Access + HMO	Blue Shield Trio HMO	Blue Shield EPO	Western Health Advantage HMO	Kaiser HMO	PERS Gold PPO	PERS Platinum PPO	Anthem Select HMO	Anthem Traditional HMO	Anthem EPO Del Norte EPO	United HealthCare HMO	HealthNet HMO	Medical Rebate
Medical Rate	$ 2,044.33	$ 1,755.47	$ 2,044.33	$ 1,501.18	$ 1,804.45	$ 1,630.41	$ 2,369.99	$ 2,229.21	$ 2,390.90	$ 2,369.99	$ 2,061.82	$ 2,319.40	N/A
Chiro	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	N/A
Vision	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50
Delta Dental	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00
Total Monthly Premium	$ 2,173.83	$ 1,884.97	$ 2,173.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,499.49	$ 2,358.71	$ 2,520.40	$ 2,499.49	$ 2,191.32	$ 2,448.90	$ 124.50
Total District Contributions **	$ 1,709.30	$ 1,709.30	$ 1,709.30	$ 1,630.68	$ 1,709.30	$ 1,709.30	$ 1,709.30	$ 1,709.30	$ 1,709.30	$ 1,709.30	$ 1,709.30	$ 1,709.30	$ 124.50
Monthly Buy-up													
12 month rate	**$ 464.53**	**$ 175.67**	**$ 464.53**	**$ -**	**$ 224.65**	**$ 50.61**	**$ 790.19**	**$ 649.41**	**$ 811.10**	**$ 790.19**	**$ 482.02**	**$ 739.60**	**$ -**
11 month rate	**$ 506.76**	**$ 191.65**	**$ 506.76**	**$ -**	**$ 245.07**	**$ 55.21**	**$ 862.03**	**$ 708.45**	**$ 884.84**	**$ 862.03**	**$ 525.85**	**$ 806.83**	**$ -**

Medical Rebate for employees hired on or before 12/31/15 ***	
12 month rate	**$ 665.51**
11 month rate	**$ 726.01**

Medical Rebate for employees hired on or after 1/1/2016 ****	
12 month rate	**$ 332.75**
11 month rate	**$ 363.00**

** Effective 06/27/2017 - Negotiated rate.
*** Effective 01/01/2016 - Negotiated fixed cap rate of $665.51 per month.
**** Effective 01/01/2016 - Negotiated fixed cap rate of $332.75 per month.

The Customer service numbers for the benefit providers are:

Blue Cross/Anthem/PERS HMO	**1-855-839-4524**	**website-www.anthem.com/ca/calpers**
Blue Cross/Anthem/PERS PPO	**1-877-737-7776**	**website-www.anthem.com/ca/calpers**
Blue Shield	**1-800-334-5847**	**website-www.blueshield.com**
Health Net	**1-800-522-0088**	**website-www.healthnet.com**
Kaiser	**1-800-464-4000**	**website-www.kp.org/calpers**
United Healthcare	**1-877-359-3714**	**website-www.uhc.com**
Western Health Advantage	**1-888-942-7377**	**website-www.westernhealth.com/calpers**
Delta Dental	**1-866-499-3001**	**website-www.deltadentalca.com**
EyeMed Vision	**1-866-804-0982**	**website-www.eyemed.com**
Optum Health Chiropractic	**1-800-428-6337**	**website-www.optum.com**

Rates Effective 01/01/2023
Management/Confidential

Benefit Plan	Blue Shield Access + HMO	Blue Shield Trio HMO	Blue Shield EPO	Western Health Advantage HMO	Kaiser HMO	PERS Gold PPO	PERS Platinum PPO	Anthem Select HMO	Anthem Traditional HMO	Anthem EPO Del Norte EPO	United Healthcare HMO	HealthNet HMO	PORAC **** PPO	Medical Rebate
Medical Rate	$ 2,044.33	$ 1,755.47	$ 2,044.33	$ 1,501.18	$ 1,804.45	$ 1,630.41	$ 2,369.99	$ 2,229.21	$ 2,390.90	$ 2,369.99	$ 2,061.82	$ 2,319.40	$ 1,752.88	N/A
Chiro	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	N/A
Vision	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50
Delta Dental	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00
Total Monthly Premium	$ 2,173.83	$ 1,884.97	$ 2,173.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,499.49	$ 2,358.71	$ 2,520.40	$ 2,499.49	$ 2,191.32	$ 2,448.90	$ 1,882.38	$ 124.50
Total District Contributions **	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 124.50
Monthly Buy-up														
12 month rate	**$ 564.53**	**$ 275.67**	**$ 564.53**	**$ 21.38**	**$ 324.65**	**$ 150.61**	**$ 890.19**	**$ 749.41**	**$ 911.10**	**$ 890.19**	**$ 582.02**	**$ 839.60**	**$ 273.08**	**$ -**
11 month rate	**$ 615.85**	**$ 300.74**	**$ 615.85**	**$ 23.32**	**$ 354.16**	**$ 164.30**	**$ 971.12**	**$ 817.54**	**$ 993.93**	**$ 971.12**	**$ 634.94**	**$ 915.92**	**$ 297.90**	**$ -**

Medical Rebate * **	
12 month rate	**$ 750.59**
11 month rate	**$ 818.83**

** District contribution rate Board Approved 05/14/2019
*** Effective 01/01/2016 50% of the Lowest Medical Plan Rate (Western Health Advantage HMO)
**** Available to Police MGT only

The Customer service numbers for the benefit providers are:

Blue Cross/Anthem/PERS HMO	**1-855-839-4524**	**website-www.anthem.com/ca/calpers**
Blue Cross/Anthem/PERS PPO	**1-877-737-7776**	**website-www.anthem.com/ca/calpers**
Blue Shield	**1-800-334-5847**	**website-www.blueshield.com**
Health Net	**1-800-522-0088**	**website-www.healthnet.com**
Kaiser	**1-800-464-4000**	**website-www.kp.org/calpers**
United Healthcare	**1-877-359-3714**	**website-www.uhc.com**
Western Health Advantage	**1-888-942-7377**	**website-www.westernhealth.com/calpers**
PORAC	**1-800-655-6397**	**website-www.anthem.com/ca/calpers**
Delta Dental	**1-866-499-3001**	**website-www.deltadentalca.com**
EyeMed Vision	**1-866-804-0982**	**website-www.eyemed.com**
Optum Health Chiropractic	**1-800-428-6337**	**website-www.optum.com**

Rates Effective 01/01/2023
Operating Engineers Local No. 3, Police Unit

Benefit Plan	Blue Shield Access + HMO	Blue Shield Trio HMO	Blue Shield EPO	Western Health Advantage HMO	Kaiser HMO	PERS Gold PPO	PERS Platinum PPO	Anthem Select HMO	Anthem Traditional HMO	Anthem EPO Del Norte EPO	United HealthCare HMO	HealthNet HMO	PORAC PPO	Medical Rebate
Medical Rate	$ 2,044.33	$ 1,755.47	$ 2,044.33	$ 1,501.18	$ 1,804.45	$ 1,630.41	$ 2,369.99	$ 2,229.21	$ 2,390.90	$ 2,369.99	$ 2,061.82	$ 2,319.40	$ 1,752.88	N/A
Chiro	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	N/A
Vision	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50
Delta Dental	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00
Total Monthly Premium	$ 2,173.83	$ 1,884.97	$ 2,173.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,499.49	$ 2,358.71	$ 2,520.40	$ 2,499.49	$ 2,191.32	$ 2,448.90	$ 1,882.38	$ 124.50
Total District Contributions **	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 124.50
Monthly Buy-up														
12 month rate	**$ 564.53**	**$ 275.67**	**$ 564.53**	**$ 21.38**	**$ 324.65**	**$ 150.61**	**$ 890.19**	**$ 749.41**	**$ 911.10**	**$ 890.19**	**$ 582.02**	**$ 839.60**	**$ 273.08**	**$ -**
11 month rate	**$ 615.85**	**$ 300.74**	**$ 615.85**	**$ 23.32**	**$ 354.16**	**$ 164.30**	**$ 971.12**	**$ 817.54**	**$ 993.93**	**$ 971.12**	**$ 634.94**	**$ 915.92**	**$ 297.90**	**$ -**

Medical Rebate for employees hired on or before 6/30/2016 * **	
12 month rate	**$ 750.59**

Medical Rebate for employees hired on or after 7/1/2016 ** **	
12 month rate	**$ 375.30**

** Effective 07/01/2017 - Negotiated rate.
*** Effective 01/01/2003 50% of the Lowest Medical Plan Rate (Western Health Advantage HMO)
**** Effective 01/01/2020 25% of the Lowest Medical Plan Rate (Western Health Advantage HMO)

The Customer service numbers for the benefit providers are:

Blue Cross/Anthem/PERS HMO	**1-855-839-4524**	**website-www.anthem.com/ca/calpers**
Blue Cross/Anthem/PERS PPO	**1-877-737-7776**	**website-www.anthem.com/ca/calpers**
Blue Shield	**1-800-334-5847**	**website-www.blueshield.com**
Health Net	**1-800-522-0088**	**website-www.healthnet.com**
Kaiser	**1-800-464-4000**	**website-www.kp.org/calpers**
United Healthcare	**1-877-359-3714**	**website-www.uhc.com**
Western Health Advantage	**1-888-942-7377**	**website-www.westernhealth.com/calpers**
PORAC	**1-800-655-6397**	**website-www.anthem.com/ca/calpers**
Delta Dental	**1-866-499-3001**	**website-www.deltadentalca.com**
EyeMed Vision	**1-866-804-0982**	**website-www.eyemed.com**
Optum Health Chiropractic	**1-800-428-6337**	**website-www.optum.com**

Rates Effective 01/01/2023
Stockton Pupil Personnel Association

Benefit Plan	Blue Shield Access + HMO	Blue Shield Trio HMO	Blue Shield EPO	Western Health Advantage HMO	Kaiser HMO	PERS Gold PPO	PERS Platinum PPO	Anthem Select HMO	Anthem Traditional HMO	Anthem EPO Del Norte EPO	United Healthcare HMO	HealthNet HMO	Medical Rebate
Medical Rate	$ 2,044.33	$ 1,755.47	$ 2,044.33	$ 1,501.18	$ 1,804.45	$ 1,630.41	$ 2,369.99	$ 2,229.21	$ 2,390.90	$ 2,369.99	$ 2,061.82	$ 2,319.40	N/A
Chiro	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	N/A
Vision	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50
Delta Dental	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00
Total Monthly Premium	$ 2,173.83	$ 1,884.97	$ 2,173.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,499.49	$ 2,358.71	$ 2,520.40	$ 2,499.49	$ 2,191.32	$ 2,448.90	$ 124.50
Total District Contributions **	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 124.50
Monthly Buy-up													
12 month rate	**$ 564.53**	**$ 275.67**	**$ 564.53**	**$ 21.38**	**$ 324.65**	**$ 150.61**	**$ 890.19**	**$ 749.41**	**$ 911.10**	**$ 890.19**	**$ 582.02**	**$ 839.60**	**$ -**
11 month rate	**$ 615.85**	**$ 300.74**	**$ 615.85**	**$ 23.32**	**$ 354.16**	**$ 164.30**	**$ 971.12**	**$ 817.54**	**$ 993.93**	**$ 971.12**	**$ 634.94**	**$ 915.92**	**$ -**

Medical Rebate for employees hired on or before 06/30/15 * **	
12 month rate	**$ 739.90**
11 month rate	**$ 807.16**

Medical Rebate for employees hired on or after 7/1/2015 ** **	
12 month rate	**$ 283.00**
11 month rate	**$ 308.73**

** Effective 03/01/2019 - Negotiated Rate
***Effective 02/13/2019 - Negotiated flat rate of $739.90
**** Effective 01/01/2016 - Negotiated Rate - Fixed cap rate of $283.00 per month.

The Customer service numbers for the benefit providers are:

Blue Cross/Anthem/PERS HMO	**1-855-839-4524**	**website-www.anthem.com/ca/calpers**
Blue Cross/Anthem/PERS PPO	**1-877-737-7776**	**website-www.anthem.com/ca/calpers**
Blue Shield	**1-800-334-5847**	**website-www.blueshield.com**
Health Net	**1-800-522-0088**	**website-www.healthnet.com**
Kaiser	**1-800-464-4000**	**website-www.kp.org/calpers**
United Healthcare	**1-877-359-3714**	**website-www.uhc.com**
Western Health Advantage	**1-888-942-7377**	**website-www.westernhealth.com/calpers**
Delta Dental	**1-866-499-3001**	**website-www.deltadentalca.com**
EyeMed Vision	**1-866-804-0982**	**website-www.eyemed.com**
Optum Health Chiropractic	**1-800-428-6337**	**website-www.optum.com**

Rates Effective 01/01/2023
Stockton Teachers Association

Benefit Plan	Blue Shield Access + HMO	Blue Shield Trio HMO	Blue Shield EPO	Western Health Advantage HMO	Kaiser HMO	PERS Gold PPO	PERS Platinum PPO	Anthem Select HMO	Anthem Traditional HMO	Anthem EPO Del Norte EPO	United HealthCare HMO	HealthNet HMO	Medical Rebate
Medical Rate	$ 2,044.33	$ 1,755.47	$ 2,044.33	$ 1,501.18	$ 1,804.45	$ 1,630.41	$ 2,369.99	$ 2,229.21	$ 2,390.90	$ 2,369.99	$ 2,061.82	$ 2,319.40	N/A
Chiro	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	N/A
Vision	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50
Delta Dental	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00
Total Monthly Premium	$ 2,173.83	$ 1,884.97	$ 2,173.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,499.49	$ 2,358.71	$ 2,520.40	$ 2,499.49	$ 2,191.32	$ 2,448.90	$ 124.50
Total District Contributions **	$ 1,913.45	$ 1,884.97	$ 1,913.45	$ 1,630.68	$ 1,913.45	$ 1,759.91	$ 1,913.45	$ 1,913.45	$ 1,913.45	$ 1,913.45	$ 1,913.45	$ 1,913.45	$ 124.50
Monthly Buy-up													
12 month rate	**$ 260.38**	**$ 0.00**	**$ 260.38**	**$ -**	**$ 20.50**	**$ -**	**$ 586.04**	**$ 445.26**	**$ 606.95**	**$ 586.04**	**$ 277.87**	**$ 535.45**	**$ -**
11 month rate	**$ 284.05**	**$ 0.00**	**$ 284.05**	**$ -**	**$ 22.36**	**$ -**	**$ 639.32**	**$ 485.74**	**$ 662.13**	**$ 639.32**	**$ 303.14**	**$ 584.12**	**$ -**

Medical Rebate for employees hired on or before 06/30/2015 ***	
12 month rate	**$ 666.00**
11 month rate	**$ 726.55**

Medical Rebate for employees hired on or after 7/01/2015 **	
12 month rate	**$ 283.00**
11 month rate	**$ 308.73**

** Effective 01/01/2019 - Negotiated rate.
*** Effective 07/01/2015 50% of the Lowest Medical Plan Rate (Western Health Advantage HMO)
**** Effective 07/01/2015 fixed cap rate of $283.00 per month.
*****Effective 01/01/2021 40% of the current health benefit allowance amount pursuant to 4.1

** Note: Commencing wtih the 2020 health plan year, the District's health benefit contribution shall be annually adjusted toward the cost of CalPERS Kaiser HMO Plan (including medical, dental, vision, chiro) as a coverage target, whether by increasing or decreasing by no more than $100 a month ($1,200 annually) as compared to the previous year's health benefit contribution amount.

The Customer service numbers for the benefit providers are:

Blue Cross/Anthem/PERS HMO	**1-855-839-4524**	**website-www.anthem.com/ca/calpers**
Blue Cross/Anthem/PERS PPO	**1-877-737-7776**	**website-www.anthem.com/ca/calpers**
Blue Shield	**1-800-334-5847**	**website-www.blueshield.com**
Health Net	**1-800-522-0088**	**website-www.healthnet.com**
Kaiser	**1-800-464-4000**	**website-www.kp.org/calpers**
United Healthcare	**1-877-359-3714**	**website-www.uhc.com**
Western Health Advantage	**1-888-942-7377**	**website-www.westernhealth.com/calpers**
Delta Dental	**1-866-499-3001**	**website-www.deltadentalca.com**
EyeMed Vision	**1-866-804-0982**	**website-www.eyemed.com**
Optum Health Chiropractic	**1-800-428-6337**	**website-www.optum.com**

Rates Effective 01/01/2023
Stockton Unified Supervisory Unit

Benefit Plan	Blue Shield Access + HMO	Blue Shield Trio HMO	Blue Shield EPO	Western Health Advantage HMO	Kaiser HMO	PERS Gold PPO	PERS Platinum PPO	Anthem Select HMO	Anthem Traditional HMO	Anthem EPO Del Norte EPO	United HealthCare HMO	HealthNet HMO	Medical Rebate
Medical Rate	$ 2,044.33	$ 1,755.47	$ 2,044.33	$ 1,501.18	$ 1,804.45	$ 1,630.41	$ 2,369.99	$ 2,229.21	$ 2,390.90	$ 2,369.99	$ 2,061.82	$ 2,319.40	N/A
Chiro	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	N/A
Vision	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50
Delta Dental	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00
Total Monthly Premium	$ 2,173.83	$ 1,884.97	$ 2,173.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,499.49	$ 2,358.71	$ 2,520.40	$ 2,499.49	$ 2,191.32	$ 2,448.90	$ 124.50
Total District Contributions **	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 124.50
Monthly Buy-up													
12 month rate	**$ 564.53**	**$ 275.67**	**$ 564.53**	**$ 21.38**	**$ 324.65**	**$ 150.61**	**$ 890.19**	**$ 749.41**	**$ 911.10**	**$ 890.19**	**$ 582.02**	**$ 839.60**	**$ -**
11 month rate	**$ 615.85**	**$ 300.74**	**$ 615.85**	**$ 23.32**	**$ 354.16**	**$ 164.30**	**$ 971.12**	**$ 817.54**	**$ 993.93**	**$ 971.12**	**$ 634.94**	**$ 915.92**	**$ -**

Medical Rebate for employees hired on or before 12/31/16 * **	
12 month rate	**$ 650.00**
11 month rate	**$ 709.09**

Medical Rebate for employees hired on or after 1/1/2017 ** **	
12 month rate	**$ 250.00**
11 month rate	**$ 272.73**

** Effective 06/27/17 - Negotiated Rate.
*** Effective 01/01/2017 - Negotiated Rate - Fixed cap rate of $650.00 per month for employees hired before 010/1/2017.
**** Effective 01/01/2017 - Negotiated Rate - Fixed cap rate of $250.00 per month for employees hired on or after 01/01/2017.

The Customer service numbers for the benefit providers are:

Blue Cross/Anthem/PERS HMO	**1-855-839-4524**	**website-www.anthem.com/ca/calpers**
Blue Cross/Anthem/PERS PPO	**1-877-737-7776**	**website-www.anthem.com/ca/calpers**
Blue Shield	**1-800-334-5847**	**website-www.blueshield.com**
Health Net	**1-800-522-0088**	**website-www.healthnet.com**
Kaiser	**1-800-464-4000**	**website-www.kp.org/calpers**
United Healthcare	**1-877-359-3714**	**website-www.uhc.com**
Western Health Advantage	**1-888-942-7377**	**website-www.westernhealth.com/calpers**
Delta Dental	**1-866-499-3001**	**website-www.deltadentalca.com**
EyeMed Vision	**1-866-804-0982**	**website-www.eyemed.com**
Optum Health Chiropractic	**1-800-428-6337**	**website-www.optum.com**

Rates Effective 01/01/2023
Unrepresented

Benefit Plan	Blue Shield Access + HMO	Blue Shield Trio HMO	Blue Shield EPO	Western Health Advantage HMO	Kaiser HMO	PERS Gold PPO	PERS Platinum PPO	Anthem Select HMO	Anthem Traditional HMO	Anthem EPO Del Norte EPO	United Healthcare HMO	HealthNet HMO	Medical Rebate
Medical Rate	$ 2,044.33	$ 1,755.47	$ 2,044.33	$ 1,501.18	$ 1,804.45	$ 1,630.41	$ 2,369.99	$ 2,229.21	$ 2,390.90	$ 2,369.99	$ 2,061.82	$ 2,319.40	N/A
Chiro	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	N/A
Vision	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50
Delta Dental	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00
Total Monthly Premium	$ 2,173.83	$ 1,884.97	$ 2,173.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,499.49	$ 2,358.71	$ 2,520.40	$ 2,499.49	$ 2,191.32	$ 2,448.90	$ 124.50
Total District Contributions **	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 1,609.30	$ 124.50
Monthly Buy-up													
12 month rate	**$ 564.53**	**$ 275.67**	**$ 564.53**	**$ 21.38**	**$ 324.65**	**$ 150.61**	**$ 890.19**	**$ 749.41**	**$ 911.10**	**$ 890.19**	**$ 582.02**	**$ 839.60**	**$ -**
11 month rate	**$ 615.85**	**$ 300.74**	**$ 615.85**	**$ 23.32**	**$ 354.16**	**$ 164.30**	**$ 971.12**	**$ 817.54**	**$ 993.93**	**$ 971.12**	**$ 634.94**	**$ 915.92**	**$ -**

Medical Rebate * **	
12 month rate	**$ 750.59**
11 month rate	**$ 818.83**

** District contribution rate Board Approved 05/14/2019
*** Effective 01/01/2016 50% of the Lowest Medical Plan Rate (Western Health Advantage HMO)

The Customer service numbers for the benefit providers are:

Blue Cross/Anthem/PERS HMO	**1-855-839-4524**	**website-www.anthem.com/ca/calpers**
Blue Cross/Anthem/PERS PPO	**1-877-737-7776**	**website-www.anthem.com/ca/calpers**
Blue Shield	**1-800-334-5847**	**website-www.blueshield.com**
Health Net	**1-800-522-0088**	**website-www.healthnet.com**
Kaiser	**1-800-464-4000**	**website-www.kp.org/calpers**
United Healthcare	**1-877-359-3714**	**website-www.uhc.com**
Western Health Advantage	**1-888-942-7377**	**website-www.westernhealth.com/calpers**
Delta Dental	**1-866-499-3001**	**website-www.deltadentalca.com**
EyeMed Vision	**1-866-804-0982**	**website-www.eyemed.com**
Optum Health Chiropractic	**1-800-428-6337**	**website-www.optum.com**

Rates Effective 01/01/2023
United Stockton Administrators

Benefit Plan	Blue Shield Access + HMO	Blue Shield Trio HMO	Blue Shield EPO	Western Health Advantage HMO	Kaiser HMO	PERS Gold PPO	PERS Platinum PPO	Anthem Select HMO	Anthem Traditional HMO	Anthem EPO Del Norte EPO	United HealthCare HMO	HealthNet HMO	Medical Rebate
Medical Rate	$ 2,044.33	$ 1,755.47	$ 2,044.33	$ 1,501.18	$ 1,804.45	$ 1,630.41	$ 2,369.99	$ 2,229.21	$ 2,390.90	$ 2,369.99	$ 2,061.82	$ 2,319.40	N/A
Chiro	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	$ 5.00	N/A
Vision	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50	$ 9.50
Delta Dental	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00	$ 115.00
Total Monthly Premium	$ 2,173.83	$ 1,884.97	$ 2,173.83	$ 1,630.68	$ 1,933.95	$ 1,759.91	$ 2,499.49	$ 2,358.71	$ 2,520.40	$ 2,499.49	$ 2,191.32	$ 2,448.90	$ 124.50
Total District Contributions **	$ 1,884.97	$ 1,884.97	$ 1,884.97	$ 1,630.68	$ 1,884.97	$ 1,759.91	$ 1,884.97	$ 1,884.97	$ 1,884.97	$ 1,884.97	$ 1,884.97	$ 1,884.97	$ 124.50
Monthly Buy-up													
12 month rate	**$ 288.86**	**$ 0.00**	**$ 288.86**	**$ -**	**$ 48.98**	**$ -**	**$ 614.52**	**$ 473.74**	**$ 635.43**	**$ 614.52**	**$ 306.35**	**$ 563.93**	**$ -**
11 month rate	**$ 315.12**	**$ 0.00**	**$ 315.12**	**$ -**	**$ 53.43**	**$ -**	**$ 670.39**	**$ 516.81**	**$ 693.20**	**$ 670.39**	**$ 334.21**	**$ 615.19**	**$ -**

Medical Rebate for employees hired on or before 06/30/2012 ***	
12 month rate	**$ 565.49**
11 month rate	**$ 616.90**

Medical Rebate for USA members hired on or after 07/01/2012 ****	
12 month rate	**$ 282.75**
11 month rate	**$ 308.45**

** Effective 01/01/2019 - Negotiared Rate (May 2019).

***Effective 01/01/2020 - Negotiated Rate (May 2019) - 30% of the District's adjusted health benefit contribution for employees hired on or befote 06/30/2012.

**** Effective 01/01/2020 - Negotiated Rate (May 2019) - 15% of the District's adjusted health benefit contribution for employees hired after 06/30/2012.

** Note: Effective January 1, 2020, Health Benefit Contribution (medical, dental, vision, chiro) shall be adjusted anually based on the monthly premium for the least expensive HMO plan (excluding Western Health Advantage) by increasing or decreasing the amount of the District health benefit contribution by no more than $100 a month ($1,200 annually) as compared to the previous year's health benefit contribution amount.

** 2020 Rate - The least expensive HMO Plan is Kaiser, which has an increased rate of $33.95/mo (12month) or $407.40/year. The District Contribution will be equal to the cost of Kaiser plus, dental, vision, and chiro).

** 2023 Rate - The least expensive HMO Plan is Blue Shield Trio HMO, which has a decreased rate of $9.98/mo (12month) or $119.76/year. The District Contribution will be equal to the cost of Blue Shield Trio HMO plus, dental, vision, and chiro.

***Note: Commencing with January 1, 2020, the District shall apy 30% of the adjusted health benefit contribution as a medical rebate to eligible employees hired on or before June 30, 2012 and 15% for all employees hired after June 30, 2012.

The Customer service numbers for the benefit providers are:

Blue Cross/Anthem/PERS HMO	**1-855-839-4524**	**website-www.anthem.com/ca/calpers**
Blue Cross/Anthem/PERS PPO	**1-877-737-7776**	**website-www.anthem.com/ca/calpers**
Blue Shield	**1-800-334-5847**	**website-www.blueshield.com**
Health Net	**1-800-522-0088**	**website-www.healthnet.com**
Kaiser	**1-800-464-4000**	**website-www.kp.org/calpers**
United Healthcare	**1-877-359-3714**	**website-www.uhc.com**
Western Health Advantage	**1-888-942-7377**	**website-www.westernhealth.com/calpers**
Delta Dental	**1-866-499-3001**	**website-www.deltadentalca.com**
EyeMed Vision	**1-866-804-0982**	**website-www.eyemed.com**
Optum Health Chiropractic	**1-800-428-6337**	**website-www.optum.com**