

DEDUCTIONS EFFECTIVE DECEMBER 1, 2019 - NOVEMBER 30, 2020

| | 2020 MONTHLY PREMIUM | 2020 COUNTY SUBSIDY | 2020 EMPLOYEE CONTRIBUTION |
|---------------------------------|----------------------------|---------------------------|----------------------------------|
| ANTHEM SELECT | | | |
| Employee Only | \$868.98 | \$714.70 | \$154.28 |
| Employee + 1 dep | \$1,737.96 | \$1,429.39 | \$308.57 |
| Employee + 2 dep | \$2,259.35 | \$1,858.22 | \$401.13 |
| ANTHEM EPO DEL NORTE | | | |
| Employee Only | \$861.18 | \$697.02 | \$164.16 |
| Employee + 1 dep | \$1,722.36 | \$1,394.05 | \$328.31 |
| Employee + 2 dep | \$2,239.07 | \$1,812.27 | \$426.80 |
| ANTHEM TRADITIONAL | | | |
| Employee Only | \$1,184.84 | \$837.09 | \$347.75 |
| Employee + 1 dep | \$2,369.68 | \$1,674.17 | \$695.51 |
| Employee + 2 dep | \$3,080.58 | \$2,176.43 | \$904.15 |
| BLUE SHIELD ACCESS + | | | |
| Employee Only | \$1,127.77 | \$743.39 | \$384.38 |
| Employee + 1 dep | \$2,255.54 | \$1,486.79 | \$768.75 |
| Employee + 2 dep | \$2,932.20 | \$1,932.83 | \$999.37 |
| BLUE SHIELD TRIO | | | |
| Employee Only | \$833.00 | \$621.75 | \$211.25 |
| Employee + 1 dep | \$1,666.00 | \$1,243.51 | \$422.49 |
| Employee + 2 dep | \$2,165.80 | \$1,616.57 | \$549.23 |
| CONTRA COSTA HEALTH PLAN | | | |
| Employee Only | \$1,137.10 | \$783.85 | \$353.25 |
| Employee + 1 dep | \$2,274.20 | \$1,649.53 | \$624.67 |
| Employee + 2 dep | \$2,956.46 | \$2,140.30 | \$816.16 |
| HEALTH NET SMARTCARE | | | |
| Employee Only | \$1,000.52 | \$706.78 | \$293.74 |
| Employee + 1 dep | \$2,001.04 | \$1,413.57 | \$587.47 |
| Employee + 2 dep | \$2,601.35 | \$1,837.65 | \$763.70 |
| KAISER PERMANENTE | | | |
| Employee Only | \$768.49 | \$621.75 | \$146.74 |
| Employee + 1 dep | \$1,536.98 | \$1,243.51 | \$293.47 |
| Employee + 2 dep | \$1,998.07 | \$1,616.57 | \$381.50 |
| PERS CHOICE | | | |
| Employee Only | \$861.18 | \$668.90 | \$192.28 |
| Employee + 1 dep | \$1,722.36 | \$1,337.80 | \$384.56 |
| Employee + 2 dep | \$2,239.07 | \$1,739.15 | \$499.92 |
| PERS SELECT | | | |
| Employee Only | \$520.29 | \$520.28 | \$0.01 |
| Employee + 1 dep | \$1,040.58 | \$1,040.57 | \$0.01 |
| Employee + 2 dep | \$1,352.75 | \$1,352.74 | \$0.01 |
| PERS CARE | | | |
| Employee Only | \$1,133.14 | \$596.84 | \$536.30 |
| Employee + 1 dep | \$2,266.28 | \$1,193.68 | \$1,072.60 |
| Employee + 2 dep | \$2,946.16 | \$1,551.79 | \$1,394.37 |

Some of the health plans are available only in certain counties and/or ZIP Codes. Please reference <http://www.co.contra-costa.ca.us/DocumentCenter/View/60663/Health-Plan-Availability-by-County> for details.

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 Counties

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|---------------------------------|----------------------------|---------------------------|----------------------------------|
| PORAC | | | |
| Employee Only | \$774.00 | \$668.32 | \$105.68 |
| Employee + 1 dep | \$1,699.00 | \$1,393.49 | \$305.51 |
| Employee + 2 dep | \$2,199.00 | \$1,790.49 | \$408.51 |
| UNITED HEALTH CARE | | | |
| Employee Only | \$899.94 | \$676.72 | \$223.22 |
| Employee + 1 dep | \$1,799.88 | \$1,353.44 | \$446.44 |
| Employee + 2 dep | \$2,339.84 | \$1,759.48 | \$580.36 |
| WESTERN HEALTH ADVANTAGE | | | |
| Employee Only | \$731.96 | \$571.82 | \$160.14 |
| Employee + 1 dep | \$1,463.92 | \$1,143.65 | \$320.27 |
| Employee + 2 dep | \$1,903.10 | \$1,486.75 | \$416.35 |

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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 Counties

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|-------------------------------|----------------------------|---------------------------|----------------------------------|
| ANTHEM SELECT | | | |
| Employee Only | \$654.04 | \$595.51 | \$58.53 |
| Employee + 1 dep | \$1,308.08 | \$1,191.02 | \$117.06 |
| Employee + 2 dep | \$1,700.50 | \$1,548.33 | \$152.17 |
| ANTHEM TRADITIONAL | | | |
| Employee Only | \$934.95 | \$752.24 | \$182.71 |
| Employee + 1 dep | \$1,869.90 | \$1,504.48 | \$365.42 |
| Employee + 2 dep | \$2,430.87 | \$1,955.83 | \$475.04 |
| BLUE SHIELD ACCESS + | | | |
| Employee Only | \$909.87 | \$704.79 | \$205.08 |
| Employee + 1 dep | \$1,819.74 | \$1,409.59 | \$410.15 |
| Employee + 2 dep | \$2,365.66 | \$1,832.47 | \$533.19 |
| HEALTH NET SALUD Y MAS | | | |
| Employee Only | \$435.14 | \$435.13 | \$0.01 |
| Employee + 1 dep | \$870.28 | \$870.27 | \$0.01 |
| Employee + 2 dep | \$1,131.36 | \$1,131.35 | \$0.01 |
| HEALTH NET SMARTCARE | | | |
| Employee Only | \$719.26 | \$643.88 | \$75.38 |
| Employee + 1 dep | \$1,438.52 | \$1,287.76 | \$150.76 |
| Employee + 2 dep | \$1,870.08 | \$1,674.10 | \$195.98 |
| KAISER PERMANENTE | | | |
| Employee Only | \$645.24 | \$602.09 | \$43.15 |
| Employee + 1 dep | \$1,290.48 | \$1,204.18 | \$86.30 |
| Employee + 2 dep | \$1,677.62 | \$1,565.44 | \$112.18 |
| PERS CHOICE | | | |
| Employee Only | \$736.28 | \$634.31 | \$101.97 |
| Employee + 1 dep | \$1,472.56 | \$1,268.63 | \$203.93 |
| Employee + 2 dep | \$1,914.33 | \$1,649.23 | \$265.10 |
| PERS SELECT | | | |
| Employee Only | \$451.54 | \$449.01 | \$2.53 |
| Employee + 1 dep | \$903.08 | \$898.02 | \$5.06 |
| Employee + 2 dep | \$1,174.00 | \$1,167.43 | \$6.57 |
| PERS CARE | | | |
| Employee Only | \$986.66 | \$571.82 | \$414.84 |
| Employee + 1 dep | \$1,973.32 | \$1,143.65 | \$829.67 |
| Employee + 2 dep | \$2,565.32 | \$1,486.75 | \$1,078.57 |
| PORAC | | | |
| Employee Only | \$749.00 | \$655.82 | \$93.18 |
| Employee + 1 dep | \$1,499.00 | \$1,293.49 | \$205.51 |
| Employee + 2 dep | \$1,960.00 | \$1,670.99 | \$289.01 |
| SHARP | | | |
| Employee Only | \$606.02 | \$572.30 | \$33.72 |
| Employee + 1 dep | \$1,212.04 | \$1,144.60 | \$67.44 |
| Employee + 2 dep | \$1,575.65 | \$1,487.98 | \$87.67 |
| UNITED HEALTH CARE | | | |
| Employee Only | \$671.60 | \$656.16 | \$15.44 |
| Employee + 1 dep | \$1,343.20 | \$1,312.32 | \$30.88 |
| Employee + 2 dep | \$1,746.16 | \$1,706.02 | \$40.14 |

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|-------------------------------|----------------------------|---------------------------|----------------------------------|
| ANTHEM SELECT | | | |
| Employee Only | \$619.93 | \$547.89 | \$72.04 |
| Employee + 1 dep | \$1,239.86 | \$1,095.78 | \$144.08 |
| Employee + 2 dep | \$1,611.82 | \$1,424.52 | \$187.30 |
| ANTHEM TRADITIONAL | | | |
| Employee Only | \$902.63 | \$698.53 | \$204.10 |
| Employee + 1 dep | \$1,805.26 | \$1,397.05 | \$408.21 |
| Employee + 2 dep | \$2,346.84 | \$1,816.17 | \$530.67 |
| BLUE SHIELD ACCESS + | | | |
| Employee Only | \$813.17 | \$671.95 | \$141.22 |
| Employee + 1 dep | \$1,626.34 | \$1,343.91 | \$282.43 |
| Employee + 2 dep | \$2,114.24 | \$1,747.09 | \$367.15 |
| BLUE SHIELD TRIO | | | |
| Employee Only | \$624.93 | \$583.39 | \$41.54 |
| Employee + 1 dep | \$1,249.86 | \$1,166.78 | \$83.08 |
| Employee + 2 dep | \$1,624.82 | \$1,516.82 | \$108.00 |
| HEALTH NET SALUD Y MAS | | | |
| Employee Only | \$392.31 | \$392.30 | \$0.01 |
| Employee + 1 dep | \$784.62 | \$784.61 | \$0.01 |
| Employee + 2 dep | \$1,020.01 | \$1,020.00 | \$0.01 |
| HEALTH NET SMARTCARE | | | |
| Employee Only | \$648.42 | \$574.95 | \$73.47 |
| Employee + 1 dep | \$1,296.84 | \$1,149.89 | \$146.95 |
| Employee + 2 dep | \$1,685.89 | \$1,494.86 | \$191.03 |
| KAISER PERMANENTE | | | |
| Employee Only | \$664.39 | \$583.39 | \$81.00 |
| Employee + 1 dep | \$1,328.78 | \$1,166.78 | \$162.00 |
| Employee + 2 dep | \$1,727.41 | \$1,516.82 | \$210.59 |
| PERS CHOICE | | | |
| Employee Only | \$710.29 | \$633.24 | \$77.05 |
| Employee + 1 dep | \$1,420.58 | \$1,266.48 | \$154.10 |
| Employee + 2 dep | \$1,846.75 | \$1,646.43 | \$200.32 |
| PERS SELECT | | | |
| Employee Only | \$435.74 | \$432.40 | \$3.34 |
| Employee + 1 dep | \$871.48 | \$864.81 | \$6.67 |
| Employee + 2 dep | \$1,132.92 | \$1,124.26 | \$8.66 |
| PERS CARE | | | |
| Employee Only | \$931.12 | \$571.82 | \$359.30 |
| Employee + 1 dep | \$1,862.24 | \$1,143.65 | \$718.59 |
| Employee + 2 dep | \$2,420.91 | \$1,486.75 | \$934.16 |
| PORAC | | | |
| Employee Only | \$699.00 | \$630.82 | \$68.18 |
| Employee + 1 dep | \$1,399.00 | \$1,243.49 | \$155.51 |
| Employee + 2 dep | \$1,894.00 | \$1,637.99 | \$256.01 |
| UNITED HEALTH CARE | | | |
| Employee Only | \$668.31 | \$578.03 | \$90.28 |
| Employee + 1 dep | \$1,336.62 | \$1,156.06 | \$180.56 |
| Employee + 2 dep | \$1,737.61 | \$1,502.89 | \$234.72 |

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**2020 CALPERS MONTHLY PREMIUMS
OUT OF STATE REGION**

**ELECTED OFFICIALS AND SHERIFF'S SWORN
EXECUTIVE MANAGEMENT EMPLOYEES BARGINING
UNITS A8 AND BS**

DEDUCTIONS EFFECTIVE DECEMBER 1, 2019 - NOVEMBER 30, 2020

| | 2020 MONTHLY PREMIUM | 2020 COUNTY SUBSIDY | 2020 EMPLOYEE CONTRIBUTION |
|--------------------------|-------------------------------------|------------------------------------|---|
| KAISER PERMANENTE | | | |
| Employee Only | \$995.19 | \$631.19 | \$364.00 |
| Employee + 1 dep | \$1,990.38 | \$1,262.38 | \$728.00 |
| Employee + 2 dep | \$2,587.49 | \$1,641.10 | \$946.39 |
| PERS CHOICE | | | |
| Employee Only | \$709.66 | \$571.82 | \$137.84 |
| Employee + 1 dep | \$1,419.32 | \$1,143.65 | \$275.67 |
| Employee + 2 dep | \$1,845.12 | \$1,486.75 | \$358.37 |
| PERS CARE | | | |
| Employee Only | \$882.03 | \$571.82 | \$310.21 |
| Employee + 1 dep | \$1,764.06 | \$1,143.65 | \$620.41 |
| Employee + 2 dep | \$2,293.28 | \$1,486.75 | \$806.53 |
| PORAC | | | |
| Employee Only | \$899.00 | \$730.82 | \$168.18 |
| Employee + 1 dep | \$1,850.00 | \$1,468.99 | \$381.01 |
| Employee + 2 dep | \$2,223.00 | \$1,802.49 | \$420.51 |