

DEDUCTIONS EFFECTIVE DECEMBER 1, 2023 - NOVEMBER 30, 2024

	2024 MONTHLY PREMIUM	2024 COUNTY SUBSIDY	2024 EMPLOYEE CONTRIBUTION
ANTHEM SELECT			
Employee Only	\$1,138.86	\$859.80	\$279.06
Employee + 1 dep	\$2,277.72	\$1,719.59	\$558.13
Employee + 2 dep	\$2,961.04	\$2,235.48	\$725.56
ANTHEM EPO DEL NORTE			
Employee Only	\$1,314.27	\$875.14	\$439.13
Employee + 1 dep	\$2,628.54	\$1,750.27	\$878.27
Employee + 2 dep	\$3,417.10	\$2,275.36	\$1,141.74
ANTHEM TRADITIONAL			
Employee Only	\$1,339.70	\$877.64	\$462.06
Employee + 1 dep	\$2,679.40	\$1,755.27	\$924.13
Employee + 2 dep	\$3,483.22	\$2,281.86	\$1,201.36
BLUE SHIELD ACCESS+			
Employee Only	\$1,076.84	\$695.56	\$381.28
Employee + 1 dep	\$2,153.68	\$1,391.11	\$762.57
Employee + 2 dep	\$2,799.78	\$1,808.45	\$991.33
BLUE SHIELD TRIO			
Employee Only	\$946.84	\$705.51	\$241.33
Employee + 1 dep	\$1,893.68	\$1,411.02	\$482.66
Employee + 2 dep	\$2,461.78	\$1,834.33	\$627.45
CONTRA COSTA HEALTH PLAN			
Employee Only	\$1,512.49	\$991.34	\$521.15
Employee + 1 dep	\$3,024.98	\$1,982.68	\$1,042.30
Employee + 2 dep	\$3,932.48	\$2,577.49	\$1,354.99
KAISER PERMANENTE			
Employee Only	\$1,021.41	\$775.05	\$246.36
Employee + 1 dep	\$2,042.82	\$1,550.10	\$492.72
Employee + 2 dep	\$2,655.67	\$2,015.14	\$640.53
PERS PLATINUM			
Employee Only	\$1,314.27	\$928.29	\$385.98
Employee + 1 dep	\$2,628.54	\$1,856.57	\$771.97
Employee + 2 dep	\$3,417.10	\$2,413.55	\$1,003.55
PERS GOLD			
Employee Only	\$914.82	\$733.77	\$181.05
Employee + 1 dep	\$1,829.64	\$1,467.53	\$362.11
Employee + 2 dep	\$2,378.53	\$1,907.80	\$470.73
PORAC			
Employee Only	\$931.00	\$749.57	\$181.43
Employee + 1 dep	\$2,117.00	\$1,655.64	\$461.36
Employee + 2 dep	\$2,651.00	\$2,120.59	\$530.41
UNITED HEALTH CARE ALLIANCE			
Employee Only	\$1,091.13	\$741.80	\$349.33
Employee + 1 dep	\$2,182.26	\$1,483.60	\$698.66
Employee + 2 dep	\$2,836.94	\$1,928.69	\$908.25
UNITED HEALTH CARE HARMONY			
Employee Only	\$937.39	\$775.05	\$162.34
Employee + 1 dep	\$1,874.78	\$1,550.10	\$324.68
Employee + 2 dep	\$2,437.21	\$2,015.14	\$422.07
WESTERN HEALTH ADVANTAGE			
Employee Only	\$807.23	\$648.92	\$158.31
Employee + 1 dep	\$1,614.46	\$1,297.82	\$316.64
Employee + 2 dep	\$2,098.80	\$1,687.18	\$411.62

DEDUCTIONS EFFECTIVE DECEMBER 1, 2023 - NOVEMBER 30, 2024

	2024 MONTHLY PREMIUM	2024 COUNTY SUBSIDY	2024 EMPLOYEE CONTRIBUTION
ANTHEM SELECT			
Employee Only	\$807.71	\$698.44	\$109.27
Employee + 1 dep	\$1,615.42	\$1,396.88	\$218.54
Employee + 2 dep	\$2,100.05	\$1,815.96	\$284.09
ANTHEM TRADITIONAL			
Employee Only	\$1,034.38	\$767.20	\$267.18
Employee + 1 dep	\$2,068.76	\$1,534.40	\$534.36
Employee + 2 dep	\$2,689.39	\$1,994.73	\$694.66
BLUE SHIELD ACCESS+			
Employee Only	\$869.14	\$756.81	\$112.33
Employee + 1 dep	\$1,738.28	\$1,513.62	\$224.66
Employee + 2 dep	\$2,259.76	\$1,967.71	\$292.05
BLUE SHIELD TRIO			
Employee Only	\$810.24	\$710.40	\$99.84
Employee + 1 dep	\$1,620.48	\$1,420.79	\$199.69
Employee + 2 dep	\$2,106.62	\$1,847.03	\$259.59
HEALTH NET SALUD Y MAS			
Employee Only	\$684.77	\$684.76	\$0.01
Employee + 1 dep	\$1,369.54	\$1,369.53	\$0.01
Employee + 2 dep	\$1,780.40	\$1,780.39	\$0.01
KAISER PERMANENTE			
Employee Only	\$904.95	\$784.15	\$120.80
Employee + 1 dep	\$1,809.90	\$1,568.29	\$241.61
Employee + 2 dep	\$2,352.87	\$2,038.79	\$314.08
PERS PLATINUM			
Employee Only	\$1,151.50	\$900.12	\$251.38
Employee + 1 dep	\$2,303.00	\$1,800.24	\$502.76
Employee + 2 dep	\$2,993.90	\$2,340.32	\$653.58
PERS GOLD			
Employee Only	\$799.44	\$728.50	\$70.94
Employee + 1 dep	\$1,598.88	\$1,457.00	\$141.88
Employee + 2 dep	\$2,078.54	\$1,894.11	\$184.43
PORAC			
Employee Only	\$926.00	\$747.07	\$178.93
Employee + 1 dep	\$1,863.00	\$1,528.64	\$334.36
Employee + 2 dep	\$2,371.00	\$1,980.59	\$390.41
SHARP			
Employee Only	\$833.24	\$755.91	\$77.33
Employee + 1 dep	\$1,666.48	\$1,511.81	\$154.67
Employee + 2 dep	\$2,166.42	\$1,965.36	\$201.06
UNITED HEALTH CARE ALLIANCE			
Employee Only	\$837.88	\$815.96	\$21.92
Employee + 1 dep	\$1,675.76	\$1,631.92	\$43.84
Employee + 2 dep	\$2,178.49	\$2,121.51	\$56.98
UNITED HEALTH CARE HARMONY			
Employee Only	\$792.65	\$689.64	\$103.01
Employee + 1 dep	\$1,585.30	\$1,379.27	\$206.03
Employee + 2 dep	\$2,060.89	\$1,793.07	\$267.82

DEDUCTIONS EFFECTIVE DECEMBER 1, 2023 - NOVEMBER 30, 2024

	2024 MONTHLY PREMIUM	2024 COUNTY SUBSIDY	2024 EMPLOYEE CONTRIBUTION
ANTHEM SELECT			
Employee Only	\$841.13	\$795.44	\$45.69
Employee + 1 dep	\$1,682.26	\$1,590.87	\$91.39
Employee + 2 dep	\$2,186.94	\$2,068.14	\$118.80
ANTHEM TRADITIONAL			
Employee Only	\$1,012.67	\$812.10	\$200.57
Employee + 1 dep	\$2,025.34	\$1,624.19	\$401.15
Employee + 2 dep	\$2,632.94	\$2,111.46	\$521.48
BLUE SHIELD ACCESS+			
Employee Only	\$756.65	\$740.96	\$15.69
Employee + 1 dep	\$1,513.30	\$1,481.92	\$31.38
Employee + 2 dep	\$1,967.29	\$1,926.51	\$40.78
BLUE SHIELD TRIO			
Employee Only	\$704.69	\$661.45	\$43.24
Employee + 1 dep	\$1,409.38	\$1,322.90	\$86.48
Employee + 2 dep	\$1,832.19	\$1,719.78	\$112.41
HEALTH NET SALUD Y MAS			
Employee Only	\$630.13	\$630.12	\$0.01
Employee + 1 dep	\$1,260.26	\$1,260.25	\$0.01
Employee + 2 dep	\$1,638.34	\$1,638.33	\$0.01
KAISER PERMANENTE			
Employee Only	\$865.41	\$793.69	\$71.72
Employee + 1 dep	\$1,730.82	\$1,587.37	\$143.45
Employee + 2 dep	\$2,250.07	\$2,063.59	\$186.48
PERS PLATINUM			
Employee Only	\$1,131.47	\$894.72	\$236.75
Employee + 1 dep	\$2,262.94	\$1,789.43	\$473.51
Employee + 2 dep	\$2,941.82	\$2,326.27	\$615.55
PERS GOLD			
Employee Only	\$785.28	\$725.97	\$59.31
Employee + 1 dep	\$1,570.56	\$1,451.93	\$118.63
Employee + 2 dep	\$2,041.73	\$1,887.52	\$154.21
PORAC			
Employee Only	\$926.00	\$747.07	\$178.93
Employee + 1 dep	\$1,863.00	\$1,528.64	\$334.36
Employee + 2 dep	\$2,371.00	\$1,980.59	\$390.41
UNITED HEALTH CARE ALLIANCE			
Employee Only	\$826.44	\$805.42	\$21.02
Employee + 1 dep	\$1,652.88	\$1,610.84	\$42.04
Employee + 2 dep	\$2,148.74	\$2,094.10	\$54.64
UNITED HEALTH CARE HARMONY			
Employee Only	\$734.76	\$730.01	\$4.75
Employee + 1 dep	\$1,469.52	\$1,460.03	\$9.49
Employee + 2 dep	\$1,910.38	\$1,898.05	\$12.33

**2024 CALPERS MONTHLY PREMIUMS
OUT OF STATE REGION**

**EMPLOYEES REPRESENTED BY IAFF LOCAL 1230
BARGAINING UNIT 4N**

DEDUCTIONS EFFECTIVE DECEMBER 1, 2023 - NOVEMBER 30, 2024

	2024 MONTHLY PREMIUM	2024 COUNTY SUBSIDY	2024 EMPLOYEE CONTRIBUTION
KAISER PERMANENTE			
Employee Only	\$1,312.45	\$816.41	\$496.04
Employee + 1 dep	\$2,624.90	\$1,632.81	\$992.09
Employee + 2 dep	\$3,412.37	\$2,122.66	\$1,289.71
PERS PLATINUM			
Employee Only	\$1,146.86	\$868.21	\$278.65
Employee + 1 dep	\$2,293.72	\$1,736.42	\$557.30
Employee + 2 dep	\$2,981.84	\$2,257.36	\$724.48
PORAC			
Employee Only	\$1,056.00	\$812.07	\$243.93
Employee + 1 dep	\$2,144.00	\$1,669.14	\$474.86
Employee + 2 dep	\$2,540.00	\$2,065.09	\$474.91