

## 2018 CalPERS HEALTH BENEFIT PREMIUMS Humboldt State University

HEALTH PLAN	Enrolled Employee & Eligible Dependents	Total Monthly Premium	All Employee Groups (except Unit 6)		Unit 6	
			Amount Paid by CSU	Amount Paid by Employee	Amount Paid by CSU	Amount Paid by Employee
BLUE SHIELD ACCESS+ CALIFORNIA	Employee Only	\$752.32	\$725.00	<b>\$27.32</b>	\$730.00	<b>\$22.32</b>
	Employee + 1	\$1,504.64	\$1,377.00	<b>\$127.64</b>	\$1,387.00	<b>\$117.64</b>
	Employee + 2 or more	\$1,956.03	\$1,766.00	<b>\$190.03</b>	\$1,786.00	<b>\$170.03</b>
ANTHEM BLUE CROSS TRADITIONAL HMO CALIFORNIA	Employee Only	\$841.34	\$725.00	<b>\$116.34</b>	\$730.00	<b>\$111.34</b>
	Employee + 1	\$1,682.68	\$1,377.00	<b>\$305.68</b>	\$1,387.00	<b>\$295.68</b>
	Employee + 2 or more	\$2,187.48	\$1,766.00	<b>\$421.48</b>	\$1,786.00	<b>\$401.48</b>
PERS SELECT CALIFORNIA	Employee Only	\$661.29	\$661.29	<b>\$0.00</b>	\$661.29	<b>\$0.00</b>
	Employee + 1	\$1,322.58	\$1,322.58	<b>\$0.00</b>	\$1,322.58	<b>\$0.00</b>
	Employee + 2 or more	\$1,719.35	\$1,719.35	<b>\$0.00</b>	\$1,719.35	<b>\$0.00</b>
PERS CHOICE	Employee Only	\$724.16	\$724.16	<b>\$0.00</b>	\$724.16	<b>\$0.00</b>
	Employee + 1	\$1,448.32	\$1,377.00	<b>\$71.32</b>	\$1,387.00	<b>\$61.32</b>
	Employee + 2 or more	\$1,882.82	\$1,766.00	<b>\$116.82</b>	\$1,786.00	<b>\$96.82</b>
PERSCARE	Employee Only	\$776.19	\$725.00	<b>\$51.19</b>	\$730.00	<b>\$46.19</b>
	Employee + 1	\$1,552.38	\$1,377.00	<b>\$175.38</b>	\$1,387.00	<b>\$165.38</b>
	Employee + 2 or more	\$2,018.09	\$1,766.00	<b>\$252.09</b>	\$1,786.00	<b>\$232.09</b>
PEACE OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA (PORAC)*	Employee Only	\$734.00	\$725.00	<b>\$9.00</b>	N/A	<b>N/A</b>
	Employee + 1	\$1,540.00	\$1,377.00	<b>\$163.00</b>	N/A	<b>N/A</b>
	Employee + 2 or more	\$1,970.00	\$1,766.00	<b>\$204.00</b>	N/A	<b>N/A</b>
ANTHEM BLUE CROSS EPO CALIFORNIA (Restricted to Del Norte County)	Employee Only	\$724.16	\$724.16	<b>\$0.00</b>	\$724.16	<b>\$0.00</b>
	Employee + 1	\$1,448.32	\$1,377.00	<b>\$71.32</b>	\$1,387.00	<b>\$61.32</b>
	Employee + 2 or more	\$1,882.82	\$1,766.00	<b>\$116.82</b>	\$1,786.00	<b>\$96.82</b>

\*This plan is restricted to employees in unit 8, State University Police Association (SUPA) and requires membership.