

CaIPERS 2019 Monthly Premiums for State and Contracting Agencies Out of State Region

Actives and Annuitants
Effective Date: 1/1/2019 - 12/31/2019

Basic Monthly Rate (B)

PLAN	Member Eligibility	Employee Only	Plan Code	Party Rate	Employee & 1 Dependent	Plan Code	Party Rate	Employee & 2+ Dependents	Plan Code	Party Rate
Kaiser Colorado	State & PA	\$964.68	252 1	1	\$1,929.36	252 2	2	\$2,508.17	252 3	3
Kaiser Georgia	State & PA	964.68	245 1	1	1,929.36	245 2	2	2,508.17	245 3	3
Kaiser Hawaii	State & PA	964.68	270 1	1	1,929.36	270 2	2	2,508.17	270 3	3
Kaiser MidAtlantic	State & PA	964.68	265 1	1	1,929.36	265 2	2	2,508.17	265 3	3
Kaiser Northwest	State & PA	964.68	219 1	1	1,929.36	219 2	2	2,508.17	219 3	3
Kaiser Washington	State & PA	964.68	392 1	1	1,929.36	392 2	2	2,508.17	392 3	3
PERS Choice	PA Only	630.41	324 1	1	1,260.82	324 2	2	1,639.07	324 3	3
PERSCare	PA Only	813.47	329 1	1	1,626.94	329 2	2	2,115.02	329 3	3
PORAC	State & PA	774.00	207 1	1	1,623.00	207 2	2	2,076.00	207 3	3

Supplement/Managed Medicare Monthly Rate (M)

PLAN	Member Eligibility	Employee Only	Plan Code	Party Rate	Employee & 1 Dependent	Plan Code	Party Rate	Employee & 2+ Dependents	Plan Code	Party Rate
Kaiser Sr Adv Colorado	State & PA	\$323.74	253 1	4	\$647.48	253 2	5	\$971.22	253 3	6
Kaiser Sr Adv Georgia	State & PA	323.74	249 1	4	647.48	249 2	5	971.22	249 3	6
Kaiser Sr Adv Hawaii	State & PA	323.74	214 1	4	647.48	214 2	5	971.22	214 3	6
Kaiser Sr Adv MidAtlantic	State & PA	323.74	261 1	4	647.48	261 2	5	971.22	261 3	6
Kaiser Sr Adv Northwest	State & PA	323.74	269 1	4	647.48	269 2	5	971.22	269 3	6
Kaiser Sr Adv Washington	State & PA	323.74	393 1	4	647.48	393 2	5	971.22	393 3	6
PERS Choice Med Supp	PA Only	360.41	334 1	4	720.82	334 2	5	1,081.23	334 3	6
PERSCare Med Supp	PA Only	394.83	339 1	4	789.66	339 2	5	1,184.49	339 3	6
PORAC Med Supp	State & PA	513.00	208 1	4	1,022.00	208 2	5	1,635.00	208 3	6
UnitedHealthcare Grp Med Adv/PPO Health Only	PA Only	299.37	363 1	4	598.74	363 2	5	898.11	363 3	6
UnitedHealthcare ¹ Grp Med Adv/PPO Health/Dental/Vision	PA Only	299.37	364 1	4	598.74	364 2	5	898.11	364 3	6

¹Dental and Vision coverage is an additional \$27.65 per member per month premium. You will be billed directly for this amount.

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Combination Monthly Rate

PLAN	Member Eligibility	Employee in M 1 Dependent in B	Plan Code	Party Rate	Employee in M 2+ Dependents in B	Plan Code	Party Rate	Employee in M & 1 Dependent in M 1+ Dependents in B	Plan Code	Party Rate
Kaiser/Sr Adv Colorado	State & PA	\$1,288.42	129 4	7	\$1,867.23	129 5	8	\$1,226.29	129 6	9
Kaiser/Sr Adv Georgia	State & PA	1,288.42	130 4	7	1,867.23	130 5	8	1,226.29	130 6	9
Kaiser/Sr Adv Hawaii	State & PA	1,288.42	137 4	7	1,867.23	137 5	8	1,226.29	137 6	9
Kaiser/Sr Adv MidAtlantic	State & PA	1,288.42	138 4	7	1,867.23	138 5	8	1,226.29	138 6	9
Kaiser/Sr Adv Northwest	State & PA	1,288.42	139 4	7	1,867.23	139 5	8	1,226.29	139 6	9
Kaiser/Sr Adv Washington	State & PA	1,288.42	394 4	7	1,867.23	394 5	8	1,226.29	394 6	9
PERS Choice/Med Supp	PA Only	990.82	350 4	7	1,369.07	350 5	8	1,099.07	350 6	9
PERSCare/Med Supp	PA Only	1,208.30	361 4	7	1,696.38	361 5	8	1,277.74	361 6	9
PORAC/Med Supp	State & PA	1,362.00	158 4	7	1,815.00	158 5	8	1,475.00	158 6	9

Combination Monthly Rate

PLAN	Member Eligibility	Employee in B 1 Dependent in M	Plan Code	Party Rate	Employee in B 2+ Dependents in M	Plan Code	Party Rate	Employee in B & 1 Dependent in M 1+ Dependents in B	Plan Code	Party Rate
Kaiser/Sr Adv Colorado	State & PA	\$1,288.42	129 7	10	\$1,612.16	129 8	11	\$1,867.23	129 9	12
Kaiser/Sr Adv Georgia	State & PA	1,288.42	130 7	10	1,612.16	130 8	11	1,867.23	130 9	12
Kaiser/Sr Adv Hawaii	State & PA	1,288.42	137 7	10	1,612.16	137 8	11	1,867.23	137 9	12
Kaiser/Sr Adv MidAtlantic	State & PA	1,288.42	138 7	10	1,612.16	138 8	11	1,867.23	138 9	12
Kaiser/Sr Adv Northwest	State & PA	1,288.42	139 7	10	1,612.16	139 8	11	1,867.23	139 9	12
Kaiser/Sr Adv Washington	State & PA	1,288.42	394 7	10	1,612.16	394 8	11	1,867.23	394 9	12
PERS Choice/Med Supp	PA Only	990.82	350 7	10	1,351.23	350 8	11	1,369.07	350 9	12
PERSCare/Med Supp	PA Only	1,208.30	361 7	10	1,603.13	361 8	11	1,696.38	361 9	12
PORAC/Med Supp	State & PA	1,283.00	158 7	10	1,896.00	158 8	11	1,736.00	158 9	12