

2019 Health Plan Preliminary Rates: Per Subscriber Per Month (PSPM)

Basic Plans		2018 Final Premium	2019 Preliminary
HMO	Anthem HMO Select	\$796.73	\$719.33
	Anthem HMO Traditional	\$841.34	\$1,020.29
	Blue Shield Access+	\$752.32	\$916.08
	Health Net Salud y Más	\$471.51	\$371.39
	Health Net SmartCare	\$790.73	\$702.74
	Kaiser CA	\$717.38	\$708.39
	Sharp	\$624.70	\$591.05
	UnitedHealthcare	\$704.59	\$723.47
	Western Health Advantage	\$720.44	\$737.44
PPO	Anthem EPO Del Norte	\$724.16	\$767.74
	PERS Choice	\$724.16	\$767.74
	PERS Select	\$661.29	\$497.53
	PERSCare	\$776.19	\$1,114.41
	PERSCare	\$776.19	\$929.88*

Medicare Plans		2018 Final Premium	2019 Preliminary
HMO	Anthem HMO Traditional	\$370.34	\$351.80
	Kaiser CA	\$316.34	\$328.71
	UnitedHealthcare	\$330.76	\$304.27
PPO	PERS Choice	\$345.97	\$361.23
	PERS Select	\$345.97	\$361.23
	PERSCare	\$382.30	\$395.53

Note: Excludes Association Health Plans and Kaiser Out-of-State.

*For action and public comments in June. The PERSCare 2019 rate for May, like the other rates, is preliminary. Options to minimize this increase for 2019 will be discussed in the Open Session during the June 2018 Pension and Health Benefits Committee meeting.

2019 Health Plan Preliminary Rates: Public Agency Regional Rates

Basic Health Plan (Northern Regions)	Bay Area Region		Sacramento Region		Other Northern Region	
	2018 Final Adjusted Premium	2019 Preliminary Premium	2018 Final Adjusted Premium	2019 Preliminary Premium	2018 Final Adjusted Premium	2019 Preliminary Premium
Anthem HMO Select	\$ 856.41	\$ 803.06	\$ 942.29	\$ 918.30	\$ 910.90	\$ 580.14
Anthem HMO Traditional	\$ 925.47	\$ 1,094.87	\$ 1,054.62	\$ 1,161.09	\$ 954.75	\$ 1,315.66
Blue Shield Access+	\$ 889.02	\$ 1,113.13	\$ 806.71	\$ 1,010.07	\$ 894.43	\$ 1,119.91
Health Net Salud y Más	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Health Net SmartCare	\$ 863.48	\$ 869.43	\$ 980.82	\$ -	\$ -	\$ -
Kaiser CA	\$ 779.86	\$ 768.25	\$ 703.96	\$ 687.99	\$ 795.43	\$ 783.13
Sharp	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
UnitedHealthcare	\$ 1,371.84	\$ 1,504.09 ¹	\$ 831.42	\$ 906.51	\$ 1,205.55	\$ 1,352.89 ¹
Western Health Advantage	\$ 792.56	\$ 800.27	\$ 744.79	\$ 726.89	\$ 744.79	\$ 726.89
Anthem EPO Del Norte	\$ -	\$ -	\$ -	\$ -	\$ 813.96	\$ 870.31
PERS Choice	\$ 800.27	\$ 869.62	\$ 735.38	\$ 801.67	\$ 813.96	\$ 870.31
PERS Select	\$ 717.50	\$ 549.02	\$ 684.90	\$ 514.15	\$ 691.78	\$ 516.83
PERSCare*	\$ 882.45	\$ 1,356.24	\$ 797.61	\$ 1,231.98	\$ 866.93	\$ 1,301.30

Basic Health Plan (Southern Regions)	Los Angeles Region		Other Southern Region		Out of State Region	
	2018 Final Adjusted Premium	2019 Preliminary Premium	2018 Final Adjusted Premium	2019 Preliminary Premium	2018 Final Adjusted Premium	2019 Preliminary Premium
Anthem HMO Select	\$ 660.17	\$ 607.26	\$ 659.69	\$ 609.20	\$ -	\$ -
Anthem HMO Traditional	\$ 784.72	\$ 868.37	\$ 735.08	\$ 821.54	\$ -	\$ -
Blue Shield Access+	\$ 613.29	\$ 767.86	\$ 695.97	\$ 871.38	\$ -	\$ -
Health Net Salud y Más	\$ 404.32	\$ 351.30	\$ 461.56	\$ 421.56	\$ -	\$ -
Health Net SmartCare	\$ 577.15	\$ 563.46	\$ 607.68	\$ 619.82	\$ -	\$ -
Kaiser	\$ 642.70	\$ 618.64	\$ 666.80	\$ 628.63	\$ 957.05	\$ 964.68
Sharp	\$ -	\$ -	\$ 618.14	\$ 591.05	\$ -	\$ -
UnitedHealthcare	\$ 602.78	\$ 629.42	\$ 616.66	\$ 659.44	\$ -	\$ -
Western Health Advantage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Anthem EPO Del Norte	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
PERS Choice	\$ 620.39	\$ 657.03	\$ 698.96	\$ 723.90	\$ 661.45	\$ 632.85
PERS Select	\$ 573.21	\$ 425.29	\$ 654.74	\$ 467.68	\$ -	\$ -
PERSCare*	\$ 673.73	\$ 1,011.22	\$ 733.50	\$ 1,087.33	\$ 718.98	\$ 974.89

Note: Excludes Associations Health Plans and Kaiser Out-of-State.

¹The Board has not accepted UnitedHealthcare's initial proposals for Bay Area and Other Northern regional rates. Negotiations continue.

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