

CalPERS 2012 Health Premiums – State Only

Effective Date: 1/1/2012 – 12/31/2012

Basic Monthly Rate (B)

PLAN	If you are ⇨	Employee Only	Plan Code	Employee & 1 Dependent	Plan Code	Employee & 2+ Dependents	Plan Code
Blue Shield		\$622.90	2051	\$1,245.80	2052	\$1,619.54	2053
Blue Shield Advantage		622.90	1411	1,245.80	1412	1,619.54	1413
Blue Shield NetValue		535.73	0421	1,071.46	0422	1,392.90	0423
Blue Shield NetValue Advantage		535.73	1461	1,071.46	1462	1,392.90	1463
CAHP (Active)*		520.96	2301	1,008.10	2302	1,317.22	2303
CCPOA (North)		560.28	2561	1,122.15	2562	1,514.74	2563
CCPOA (South)		462.14	2661	925.83	2662	1,250.77	2663
Kaiser (CA)		559.11	0561	1,118.22	0562	1,453.69	0563
Kaiser (out-of-state)		816.47	*1	1,632.94	*2	2,122.82	*3
PERS Choice		545.56	2221	1,091.12	2222	1,418.46	2223
PERS Select		463.12	0451	926.24	0452	1,204.11	0453
PERSCare		977.98	2781	1,955.96	2782	2,542.75	2783
PORAC		556.00	2071	1,041.00	2072	1,323.00	2073

*Adjusted rates for bargaining unit R05. Contact CAHP for other bargaining units.

Supplement/Managed Medicare Monthly Rate (SM)

PLAN	If you are ⇨	Employee Only	Plan Code	Employee & 1 Dependent	Plan Code	Employee & 2+ Dependents	Plan Code
Blue Shield		\$337.99	2061	\$675.98	2062	\$1,013.97	2063
Blue Shield Advantage		337.99	1511	675.98	1512	1,013.97	1513
Blue Shield NetValue		337.99	0551	675.98	0552	1,013.97	0553
Blue Shield NetValue Advantage		337.99	1561	675.98	1562	1,013.97	1563
CAHP		354.00	2311	655.00	2312	832.00	2313
CCPOA (North)		386.26	2571	773.85	2572	1,157.12	2573
CCPOA (South)		386.26	2671	773.85	2672	1,157.12	2673
Kaiser (CA)		277.81	0661	555.62	0662	833.43	0663
Kaiser (out-of-state)		366.87	**1	733.74	**2	1,100.61	**3
PERS Choice		383.44	2231	766.88	2232	1,150.32	2233
PERS Select		383.44	0461	766.88	0462	1,150.32	0463
PERSCare		432.43	2791	864.86	2792	1,297.29	2793
PORAC		418.00	2081	833.00	2082	1,331.00	2083

CalPERS 2012 Health Premiums – State Only

Effective Date: 1/1/2012 – 12/31/2012

Combination Monthly Rate

PLAN	If you are ⇨	Employee in SM		Employee in SM		Employee &	
		1 Dependent in B	Plan Code	2+ Dependents in B	Plan Code	1 Dependent in SM	Plan Code
Blue Shield		\$960.89	2064	\$1,334.63	2065	\$1,049.72	2066
Blue Shield Advantage		960.89	1514	1,334.63	1515	1,049.72	1516
Blue Shield NetValue		873.72	0554	1,195.16	0555	997.42	0556
Blue Shield NetValue Advantage		873.72	1564	1,195.16	1565	997.42	1566
CAHP		921.36	2314	1,281.64	2315	1,015.28	2316
CCPOA (North)		948.13	2574	1,340.72	2575	1,166.44	2576
CCPOA (South)		849.95	2674	1,174.89	2675	1,098.79	2676
Kaiser (CA)		836.92	0664	1,172.39	0665	891.09	0666
Kaiser (out-of-state)		1,183.34	**4	1,673.22	**5	1,223.62	**6
PERS Choice		929.00	2234	1,256.34	2235	1,094.22	2236
PERS Select		846.56	0464	1,124.43	0465	1,044.75	0466
PERSCare		1,410.41	2794	1,997.20	2795	1,451.65	2796
PORAC		903.00	2084	1,185.00	2085	1,115.00	2086

PLAN	If you are ⇨	Employee in B		Employee in B		Employee &	
		1 Dependent in SM	Plan Code	2+ Dependents in SM	Plan Code	1 Dependent in B	Plan Code
Blue Shield		\$960.89	2067	\$1,298.88	2068	\$1,334.63	2069
Blue Shield Advantage		960.89	1517	1,298.88	1518	1,334.63	1519
Blue Shield NetValue		873.72	0557	1,211.71	0558	1,195.16	0559
Blue Shield NetValue Advantage		873.72	1567	1,211.71	1568	1,195.16	1569
CAHP		903.71	2317	1,080.71	2318	1,263.99	2319
CCPOA (North)		947.87	2577	1,331.14	2578	1,340.46	2579
CCPOA (South)		849.73	2677	1,233.00	2678	1,174.67	2679
Kaiser (CA)		836.92	0667	1,114.73	0668	1,172.39	0669
Kaiser (out-of-state)		1,183.34	**7	1,550.21	**8	1,673.22	**9
PERS Choice		929.00	2237	1,312.44	2238	1,256.34	2239
PERS Select		846.56	0467	1,230.00	0468	1,124.43	0469
PERSCare		1,410.41	2797	1,842.84	2798	1,997.20	2799
PORAC		971.00	2087	1,469.00	2088	1,253.00	2089

Kaiser Out-of-State	*Basic	**Supplemental	Kaiser Out-of-State	*Basic	**Supplemental
Colorado	252	253	Mid-Atlantic	265	261
Georgia	245	249	Northwest	219	269
Hawaii	270	214	Ohio	262	263