

## 2021 Health Care and Insurance Monthly Premium Rate Chart

EMPLOYEE COLLECTIVE BARGAINING UNITS			CSU HEALTH CONTRIBUTIONS BY UNIT		
Represented Units:			Coverage:	All Other Units	Unit 6 Only
CFUAPD	Unit 1	(Physicians)	Employee Only	\$798.00	\$803.00
CFA	Unit 3	(Faculty)	Employee + 1 Dependent	\$1,519.00	\$1,529.00
APC	Unit 4	(Academic Professionals)	Employee + 2 or more	\$1,937.00	\$1,957.00
TEAMSTERS 2010	Unit 6	(Skilled Crafts)	<b>DENTAL, BASIC VISION, LIFE INSURANCE* and LONG TERM DISABILITY* PREMIUMS ARE FULLY COVERED BY THE CSU</b>  * Coverage varies and is not applicable to all Collective Bargaining Units		
SUPA	Unit 8	(Public Safety Officers)			
CSUEU	Units 2, 5, 7, & 9	(Health, Operations, Technical & Administrative Support Services)			
<b>Non-Representative:</b>		MPP, Confidential, and Excluded Classifications	<b>NOTE:</b> Premium contributions are subject to change due to Collective Bargaining negotiations.		

Health Plan	Eligible Dependents	Plan Code	2021				
			Total Mo. Premium	Employee Mo. Deduction	Unit 6 Mo. Deduction	While on Leave	While on COBRA
<b>ANTHEM TRADITIONAL (HMO)</b>	Employee Only	1801	\$1,220.32	\$422.32	\$417.32	\$1,220.32	\$1,244.73
	Employee + 1 Dependent	1802	\$2,440.64	\$921.64	\$911.64	\$2,440.64	\$2,489.45
	Employee + 2 or more	1803	\$3,172.83	\$1,235.83	\$1,215.83	\$3,172.83	\$3,236.29
<b>KAISER (HMO)</b>	Employee Only	0561	\$761.62	\$0.00	\$0.00	\$761.62	\$776.85
	Employee + 1 Dependent	0562	\$1,523.24	\$4.24	\$0.00	\$1,523.24	\$1,553.70
	Employee + 2 or more	0563	\$1,980.21	\$43.21	\$23.21	\$1,980.21	\$2,019.81
<b>HEALTH NET SMARTCARE (HMO)</b>	Employee Only	1851	\$924.36	\$126.36	\$121.36	\$924.36	\$942.85
	Employee + 1 Dependent	1852	\$1,848.72	\$329.72	\$319.72	\$1,848.72	\$1,885.69
	Employee + 2 or more	1853	\$2,403.34	\$466.34	\$446.34	\$2,403.34	\$2,451.41
<b>UNITED HEALTHCARE (HMO)</b>	Employee Only	1871	\$755.61	\$0.00	\$0.00	\$755.61	\$770.72
	Employee + 1 Dependent	1872	\$1,511.22	\$0.00	\$0.00	\$1,511.22	\$1,541.44
	Employee + 2 or more	1873	\$1,964.59	\$27.59	\$7.59	\$1,964.59	\$2,003.88
<b>WESTERN HEALTH ADVANTAGE (HMO)</b>	Employee Only	1761	\$757.02	\$0.00	\$0.00	\$757.02	\$772.16
	Employee + 1 Dependent	1762	\$1,514.04	\$0.00	\$0.00	\$1,514.04	\$1,544.32
	Employee + 2 or more	1763	\$1,968.25	\$31.25	\$11.25	\$1,968.25	\$2,007.62
<b>PERS CARE (PPO)</b>	Employee Only	2781	\$1,111.87	\$313.87	\$308.87	\$1,111.87	\$1,134.11
	Employee + 1 Dependent	2782	\$2,223.74	\$704.74	\$694.74	\$2,223.74	\$2,268.21
	Employee + 2 or more	2783	\$2,890.86	\$953.86	\$933.86	\$2,890.86	\$2,948.68
<b>PERS CHOICE (PPO)</b>	Employee Only	2221	\$849.23	\$51.23	\$46.23	\$849.23	\$866.21
	Employee + 1 Dependent	2222	\$1,698.46	\$179.46	\$169.46	\$1,698.46	\$1,732.43
	Employee + 2 or more	2223	\$2,208.00	\$271.00	\$251.00	\$2,208.00	\$2,252.16
<b>PERS SELECT (PPO)</b>	Employee Only	0451	\$527.39	\$0.00	\$0.00	\$527.39	\$537.94
	Employee + 1 Dependent	0452	\$1,054.78	\$0.00	\$0.00	\$1,054.78	\$1,075.88
	Employee + 2 or more	0453	\$1,371.21	\$0.00	\$0.00	\$1,371.21	\$1,398.63
<b>PORAC (Unit 8 (SUPA) only)</b>	Employee Only	2071	\$750.00	\$0.00	<b>NOT APPLICABLE</b>	\$750.00	\$765.00
	Employee + 1 Dependent	2072	\$1,449.00	\$0.00		\$1,449.00	\$1,477.98
	Employee + 2 or more	2073	\$1,927.00	\$59.00		\$1,927.00	\$1,965.54
<b>KAISER (OUT OF STATE)</b>	Employee Only	Codes	\$1,040.15	\$242.15	\$237.15	\$1,040.15	\$1,060.95
	Employee + 1 Dependent	vary by region	\$2,080.30	\$561.30	\$551.30	\$2,080.30	\$2,121.91
	Employee + 2 or more	vary by region	\$2,704.39	\$767.39	\$747.39	\$2,704.39	\$2,758.48

## 2021 Health Care and Insurance Monthly Premium Rate Chart

Dental Plan	Eligible Group	Group Numbers	Enrollment	Employer Mo. Premium	While on Leave	While on COBRA
<b>Delta Basic (PPO)</b>	Public Safety (Unit 8)	4018-2041	Employee Only	\$30.45	\$30.45	\$31.06
	E99 (except Teaching Associates)	4018-4051	Employee + 1 Dep.	\$57.52	\$57.52	\$58.67
	STRS Annuitants	4018-2061	Employee + 2 or more	\$115.49	\$115.49	\$117.80
	PERS Annuitants	4018-2071				
<b>Delta Enhanced Level II (PPO)</b>	Physicians (Unit 1)	4018-2011	Employee Only Employee + 1 Dep. Employee + 2 or more	\$45.85 \$86.52 \$169.03	\$45.85 \$86.52 \$169.03	\$46.77 \$88.25 \$172.41
	CSUEU (Unit 2,5,7,9)	4018-2021				
	Faculty (Unit 3)	4018-3011				
	FERP Annuitants Academic	4018-3031				
	Support (Unit 4) Skilled	4018-3021				
	Crafts (Unit 6)	4018-2031				
	Confidential (C99)	4018-4011				
Management Personnel Plan (M80)	4018-4011					
Executive (M98)	4018-4011					
<b>DELTA CARE USA – Basic (HMO)</b>	Public Safety (Unit 8)	72034-0001	Employee Only	\$18.85	\$18.85	\$19.23
	E99 (except Teaching Associates)	72034-0001	Employee + 1 Dep.	\$31.08	\$31.08	\$31.70
	STRS Annuitants	72034-0004	Employee + 2 or more	\$45.97	\$45.97	\$46.89
	PERS Annuitants	72034-0004				
<b>DELTA CARE USA – Enhanced (HMO)</b>	Physicians (Unit 1)	72034-0005	Employee Only Employee + 1 Dep. Employee + 2 or more	\$25.04 \$41.33 \$61.12	\$25.04 \$41.33 \$61.12	\$25.54 \$42.16 \$62.34
	CSUEU (Unit 2,5,7,9)	72034-0005				
	Faculty (Unit 3)	72034-0005				
	FERP Annuitants	72034-0008				
	Academic Support (Unit 4)	72034-0005				
	Skilled Crafts (Unit 6)	72034-0005				
	Confidential (C99)	72034-0005				
Management Personnel Plan (M80)	72034-0005					
Executive (M98)	72034-0005					

Vision by Vision Service Plan (VSP)	Group/Eligible Dependents	Payroll Code	Employer Mo. Premium	Employee Mo. Deduction	While on Leave	While on COBRA
<b>Basic Plan - Group #30059426</b>	All Groups (except FERP)	450-003	\$7.10	\$0.00	\$7.10	\$7.24
	FERP	450-997	\$85.20 (annual)	\$0.00	\$85.20 (annual)	\$7.24 (per month)
<b>Premier Plan</b>	Employee Only	377-001	\$7.10	\$4.11	\$11.21	\$11.43
	Employee + 1 Dependent	377-001	\$7.10	\$15.32	\$22.42	\$22.87
	Employee + 2 or more	377-001	\$7.10	\$28.99	\$36.09	\$36.81

Life Insurance and AD&D Plan	Group	Payroll Code	Coverage	Employer Mo. Premium
<b>CSU-Paid Life Insurance and AD&amp;D Policy (The Standard)</b>	Physicians (Unit 1)	250-028	\$25K Life and AD&D	\$1.53
	CSUEU (Units 2,5,7,9)	250-027	\$10K Life & AD&D	\$0.61
	Faculty (Unit 3)	250-021	\$50K Life & AD&D	\$3.05
	Academic Support (Unit 4)	250-024	\$25K Life & AD&D	\$1.53
	Public Safety (Unit 8)	250-023	\$10K Life & AD&D	\$0.61
	Confidential (C99)	250-025	\$50K Life & AD&D	\$3.05
	Teaching Associates (R11)	250-022	\$50K Life only	\$2.55
	Management Personnel Plan (M80)	250-020	\$100K Life & AD&D	\$6.10
	Executive (M98)	250-026	\$250K Life & AD&D	\$15.25

Long Term Disability Plan	Group	Payroll Code	Coverage	Employer Mo. Premium
<b>CSU-Paid Long Term Disability Policy (The Standard)</b>	Physicians (Unit 1)	250-103	See The Standard's Long Term Disability publication for amount of coverage	\$38.12
	Faculty (Unit 3)	250-101		\$2.81
	Academic Support (Unit 4)	250-102		\$1.23
	Confidential (C99)	250-105		\$3.89
	Management Personnel Plan (M80)	250-100		\$3.83
	Executive (M98)	250-104		\$7.36