

2023 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	\$883.00	\$888.00		
CFA	Unit 3	(Faculty)	Employee + 1 Dependent	\$1,699.00	\$1,709.00		
APC	Unit 4	(Academic Professionals)	Employee + 2 or more	\$2,124.00	\$2,144.00		
TEAMSTERS 2010 Unit 6 (Skilled Crafts)			DENTAL, BASIC VISION, LIFE INSURANCE* and LONG TERM				
SUPA	Unit 8	(Public Safety Officers)	DISABILITY* PREMIUMS ARE FULLY COVERED BY THE CSU				
CSUEU	Units 2, 5, 7, & 9	(Health, Operations, Technical & Administrative Support Services)	* Coverage varies and is not applicable to all Collective Bargaining Units				
Non-Representative:		MPP, Confidential, and Excluded Classifications	NOTE: Premium contributions are subject to change due to Collective Bargaining negotiations.				

		Divi	2023				
Health Plan	Eligible Dependents	Plan Code	Total Mo. Premium	Employee Mo. Deduction	Unit 6 Mo. Deduction	While on Leave	While on COBRA
ANTHEM TRADITIONAL	Employee Only	1801	\$1,116.65	\$233.65	\$228.65	\$1,116.65	\$1,138.98
(HMO)	Employee + 1 Dependent	1802	\$2,233.30	\$534.30	\$524.30	\$2,233.30	\$2,277.97
(HIMO)	Employee + 2 or more	1803	\$2,903.29	\$779.29	\$759.29	\$2,903.29	\$2,961.36
	Employee Only	1411	\$842.61	\$0.00	\$0.00	\$842.61	\$859.46
BLUE SHIELD ACCESS+	Employee + 1 Dependent	1412	\$1,685.22	\$0.00	\$0.00	\$1,685.22	\$1,718.92
	Employee + 2 or more	1413	\$2,190.79	\$66.79	\$46.79	\$2,190.79	\$2,234.61
	Employee Only	0561	\$852.68	\$0.00	\$0.00	\$852.68	\$869.73
KAISER (HMO)	Employee + 1 Dependent	0562	\$1,705.36	\$6.36	\$0.00	\$1,705.36	\$1,739.47
	Employee + 2 or more	0563	\$2,216.97	\$92.97	\$72.97	\$2,216.97	\$2,261.31
	Employee Only	1851	\$993.39	\$110.39	\$105.39	\$993.39	\$1,013.26
HEALTH NET	Employee + 1 Dependent	1852	\$1,986.78	\$287.78	\$277.78	\$1,986.78	\$2,026.52
SMARTCARE (HMO)	Employee + 2 or more	1853	\$2,582.81	\$458.81	\$438.81	\$2,582.81	\$2,634.47
	Employee Only	1871	\$841.72	\$0.00	\$0.00	\$841.72	\$858.55
UNITED HEALTHCARE	Employee + 1 Dependent	1872	\$1,683.44	\$0.00	\$0.00	\$1,683.44	\$1,717.11
ALLIANCE (HMO)	Employee + 2 or more	1873	\$2,188.47	\$64.47	\$44.47	\$2,188.47	\$2,232.24
	Employee Only	1761	\$760.17	\$0.00	\$0.00	\$760.17	\$775.37
WESTERN HEALTH	Employee + 1 Dependent	1762	\$1,520.34	\$0.00	\$0.00	\$1,520.34	\$1,550.75
ADVANTAGE (HMO)	Employee + 2 or more	1763	\$1,976.44	\$0.00	\$0.00	\$1,976.44	\$2,015.97
DEDC DI ATINUM (DDO)	Employee Only	4341	\$1,083.89	\$200.89	\$195.89	\$1,083.89	\$1,105.57
PERS PLATINUM (PPO) Formerly PERS Care and	Employee + 1 Dependent	4342	\$2,167.78	\$468.78	\$458.78	\$2,167.78	\$2,211.14
PERS Choice	Employee + 2 or more	4343	\$2,818.11	\$694.11	\$674.11	\$2,818.11	\$2,874.47
	Employee Only	4371	\$766.11	\$0.00	\$0.00	\$766.11	\$781.43
PERS GOLD (PPO) formerly PERS Select	Employee + 1 Dependent	4372	\$1,532.22	\$0.00	\$0.00	\$1,532.22	\$1,562.86
Tornierly FERO Select	Employee + 2 or more	4373	\$1,991.89	\$0.00	\$0.00	\$1,991.89	\$2,031.73
PORAC	Employee Only	2071	\$775.00	\$0.00		\$775.00	\$790.50
Unit 8 (SUPA) only	Employee + 1 Dependent	2072	\$1,525.00	\$0.00	NOT APPLICABLE	\$1,525.00	\$1,555.50
Silit o (OOI A) Only	Employee + 2 or more	2073	\$2,000.00	\$0.00		\$2,000.00	\$2,040.00
	Employee Only	Codes	\$1,155.43	\$272.43	\$267.43	\$1,155.43	\$1,178.54
KAISER (OUT OF STATE)	Employee + 1 Dependent	vary by	\$2,310.86	\$611.86	\$601.86	\$2,310.86	\$2,357.08
	Employee + 2 or more	region	\$3,004.12	\$880.12	\$860.12	\$3,004.12	\$3,064.20



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

Vision by Vison Service Plan (VSP)	Group/Eligible Dependents	Payroll Code	Employer Mo. Premium	Employee Mo. Deduction	While on Leave	While on COBRA
Basic Plan -	All Groups (except FERP)	450-003	\$6.96	\$0.00	\$6.96	\$7.09
Group #30059426	FERP	450-997	\$83.52 (annual)	\$0.00	\$83.52 (annual)	\$7.09 (per month)
	Employee Only	377-001	\$6.96	\$4.03	\$10.99	\$11.20
Premier Plan	Employee + 1 Dependent	377-001	\$6.96	\$15.01	\$21.97	\$22.40
	Employee + 2 or more	377-001	\$6.96	\$28.41	\$35.37	\$36.07

Life Insurance and AD&D Group Plan		Payroll Code	Coverage	Employer Mo. Premium
	Physicians (Unit 1)	250-028	\$25K Life and AD&D	\$1.53
	CSUEU (Units 2,5,7,9)	250-027	\$50K Life & AD&D	\$3.05
CSU-Paid Life Insurance	Faculty (Unit 3)	250-021	\$50K Life & AD&D	\$3.05
and AD&D Policy	Academic Support (Unit 4)	250-024	\$25K Life & AD&D	\$1.53
(The Standard)	Public Safety (Unit 8)	250-023	\$10K Life & AD&D	\$3.05
(The Gundard)	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
	Physicians (Unit 1)	250-103		\$45.47
CSU-Paid	Faculty (Unit 3)	250-101	See The Standard's Long Term	\$3.07
Long Term Disability	Academic Support (Unit 4)	250-102	Disability publication for amount	\$1.34
Policy (The Standard)	Confidential (C99)	250-105	of coverage	\$4.31
	Management Personnel Plan (M80) 250-1	250-100		\$4.36
	Executive (M98)	250-104		\$7.36