

2025 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	\$1,060.00	\$1,065.00
CFA	Unit 3	(Faculty)	Employee + 1 Dependent	\$2,039.00	\$2,049.00
APC	Unit 4	(Academic Professionals)	Employee + 2 or more	\$2,551.00	\$2,571.00
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	2025				
			Total Mo. Premium	Employee Mo. Deduction	Unit 6 Mo. Deduction	While on Leave	While on COBRA
ANTHEM TRADITIONAL (HMO)	Employee Only	1801	\$1,309.07	\$249.07	\$244.07	\$1,309.07	\$1,335.25
	Employee + 1 Dependent	1802	\$2,618.14	\$579.14	\$569.14	\$2,618.14	\$2,670.50
	Employee + 2 or more	1803	\$3,403.58	\$852.58	\$832.58	\$3,403.58	\$3,471.65
BLUE SHIELD ACCESS+ (HMO)	Employee Only	1411	\$965.86	\$0.00	\$0.00	\$965.86	\$985.18
	Employee + 1 Dependent	1412	\$1,931.72	\$0.00	\$0.00	\$1,931.72	\$1,970.35
	Employee + 2 or more	1413	\$2,511.24	\$0.00	\$0.00	\$2,511.24	\$2,561.46
KAISER (HMO)	Employee Only	0561	\$1,045.20	\$0.00	\$0.00	\$1,045.20	\$1,066.10
	Employee + 1 Dependent	0562	\$2,090.40	\$51.40	\$41.40	\$2,090.40	\$2,132.21
	Employee + 2 or more	0563	\$2,717.52	\$166.52	\$146.52	\$2,717.52	\$2,771.87
UNITED HEALTHCARE ALLIANCE (HMO)	Employee Only	1871	\$961.35	\$0.00	\$0.00	\$961.35	\$980.58
	Employee + 1 Dependent	1872	\$1,922.70	\$0.00	\$0.00	\$1,922.70	\$1,961.15
	Employee + 2 or more	1873	\$2,499.51	\$0.00	\$0.00	\$2,499.51	\$2,549.50
WESTERN HEALTH ADVANTAGE (HMO)	Employee Only	1761	\$914.27	\$0.00	\$0.00	\$914.27	\$932.56
	Employee + 1 Dependent	1762	\$1,828.54	\$0.00	\$0.00	\$1,828.54	\$1,865.11
	Employee + 2 or more	1763	\$2,377.10	\$0.00	\$0.00	\$2,377.10	\$2,424.64
PERS PLATINUM (PPO)	Employee Only	6451	\$1,335.30	\$275.30	\$270.30	\$1,335.30	\$1,362.01
	Employee + 1 Dependent	6452	\$2,670.60	\$631.60	\$621.60	\$2,670.60	\$2,724.01
	Employee + 2 or more	6453	\$3,471.78	\$920.78	\$900.78	\$3,471.78	\$3,541.22
PERS GOLD (PPO)	Employee Only	6421	\$943.70	\$0.00	\$0.00	\$943.70	\$962.57
	Employee + 1 Dependent	6422	\$1,887.40	\$0.00	\$0.00	\$1,887.40	\$1,925.15
	Employee + 2 or more	6423	\$2,453.62	\$0.00	\$0.00	\$2,453.62	\$2,502.69
PORAC Unit 8 (SUPA) only	Employee Only	2071	\$894.00	\$0.00	NOT APPLICABLE	\$894.00	\$911.88
	Employee + 1 Dependent	2072	\$1,789.00	\$0.00		\$1,789.00	\$1,824.78
	Employee + 2 or more	2073	\$2,325.00	\$0.00		\$2,325.00	\$2,371.50
KAISER (OUT OF STATE)	Employee Only	Codes	\$1,422.26	\$362.26	\$357.26	\$1,422.26	\$1,450.71
	Employee + 1 Dependent	vary by	\$2,844.52	\$805.52	\$795.52	\$2,844.52	\$2,901.41
	Employee + 2 or more	region	\$3,697.88	\$1,146.88	\$1,126.88	\$3,697.88	\$3,771.84

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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)	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				
Delta Enhanced Level II (PPO)	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					
DELTA CARE USA – Basic (HMO)	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				
DELTA CARE USA – Enhanced (HMO)	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
Basic Plan - Group #30059426	All Groups (except FERP)	450-003	\$6.96	\$0.00	\$6.96	\$7.09
	FERP	450-997	\$83.52 (annual)	\$0.00	\$83.52 (annual)	\$7.09 (per month)
Premier Plan - Group #30077022	Employee Only	377-001	\$6.96	\$5.06	\$12.02	\$12.26
	Employee + 1 Dependent	377-001	\$6.96	\$17.08	\$24.04	\$24.52
	Employee + 2 or more	377-001	\$6.96	\$31.73	\$38.69	\$39.46

Life Insurance and AD&D Plan	Group	Payroll Code	Coverage	Employer Mo. Premium
CSU-Paid Life Insurance and AD&D Policy (The Standard)	Physicians (Unit 1)	250-028	\$25K Life and AD&D	\$1.78
	CSUEU (Units 2,5,7,9)	250-027	\$50K Life & AD&D	\$3.55
	Faculty (Unit 3)	250-021	\$50K Life & AD&D	\$3.55
	Academic Support (Unit 4)	250-024	\$25K Life & AD&D	\$1.78
	Public Safety (Unit 8)	250-023	\$10K Life & AD&D	\$3.55
	Confidential (C99)	250-025	\$50K Life & AD&D	\$3.55
	Teaching Associates (R11)	250-022	\$50K Life only	\$3.05
	Management Personnel Plan (M80)	250-020	\$100K Life & AD&D	\$7.10
Executive (M98)	250-026	\$250K Life & AD&D	\$17.75	

Long Term Disability Plan	Group	Payroll Code	Coverage	Employer Mo. Premium
CSU-Paid Long Term Disability Policy (The Standard)	Physicians (Unit 1)	250-103	See The Standard's Long Term Disability publication for amount of coverage	\$54.13
	Faculty (Unit 3)	250-101		\$3.56
	Academic Support (Unit 4)	250-102		\$1.52
	Confidential (C99)	250-105		\$4.90
	Management Personnel Plan (M80)	250-100		\$4.98
	Executive (M98)	250-104		\$13.21