

CaIPERS HEALTH INSURANCE RATE SHEET

January 1, 2023 - December 31, 2023

EMPLOYEE + FAMILY COVERAGE *Annual Cap:*
\$13,000

Hourly cap:
\$135.42

DAILY HOURS	PLAN NAME	MONTHLY COST	DISTRICT MONTHLY CAP	EMPLOYEE MONTHLY COST
8	PERS Gold	\$2,146.59	\$1,083.33	\$1,063.26
7.5	PERS Gold	\$2,146.59	\$1,015.63	\$1,130.97
7	PERS Gold	\$2,146.59	\$947.92	\$1,198.67
6.5	PERS Gold	\$2,146.59	\$880.21	\$1,266.38
6	PERS Gold	\$2,146.59	\$812.50	\$1,334.09
5	PERS Gold	\$2,146.59	\$677.08	\$1,469.51
4.5	PERS Gold	\$2,146.59	\$609.38	\$1,537.22
4	PERS Gold	\$2,146.59	\$541.67	\$1,604.92
8	Blue Shield EPO	\$2,691.55	\$1,083.33	\$1,608.22
7.5	Blue Shield EPO	\$2,691.55	\$1,015.63	\$1,675.93
7	Blue Shield EPO	\$2,691.55	\$947.92	\$1,743.63
6.5	Blue Shield EPO	\$2,691.55	\$880.21	\$1,811.34
6	Blue Shield EPO	\$2,691.55	\$812.50	\$1,879.05
5	Blue Shield EPO	\$2,691.55	\$677.08	\$2,014.47
4.5	Blue Shield EPO	\$2,691.55	\$609.38	\$2,082.18
4	Blue Shield EPO	\$2,691.55	\$541.67	\$2,149.88
8	PERS Platinum	\$3,120.31	\$1,083.33	\$2,036.98
7.5	PERS Platinum	\$3,120.31	\$1,015.63	\$2,104.69
7	PERS Platinum	\$3,120.31	\$947.92	\$2,172.39
6.5	PERS Platinum	\$3,120.31	\$880.21	\$2,240.10
6	PERS Platinum	\$3,120.31	\$812.50	\$2,307.81
5	PERS Platinum	\$3,120.31	\$677.08	\$2,443.23
4.5	PERS Platinum	\$3,120.31	\$609.38	\$2,510.94
4	PERS Platinum	\$3,120.31	\$541.67	\$2,578.64

CVT	Employee Only	Employee + Family
CVT DENTAL	\$84.22	\$84.22
CVT VISION	\$7.28	\$19.20

Different rates apply to dependents with Medicare coverage; ask if applicable

11-month employees who receive a 'summer bucket' check should divide the total annual medical/dental/vision cost by 11 paychecks to determine actual monthly payroll deduction