

DEDUCTIONS EFFECTIVE DECEMBER 1, 2020 - NOVEMBER 30, 2021

| | 2021 MONTHLY PREMIUM | 2021 COUNTY SUBSIDY | 2021 EMPLOYEE CONTRIBUTION |
|---------------------------------|----------------------------|---------------------------|----------------------------------|
| ANTHEM SELECT | | | |
| Employee Only | \$925.60 | \$753.17 | \$172.43 |
| Employee + 1 dep | \$1,851.20 | \$1,506.33 | \$344.87 |
| Employee + 2 dep | \$2,406.56 | \$1,958.24 | \$448.32 |
| ANTHEM EPO DEL NORTE | | | |
| Employee Only | \$935.84 | \$761.45 | \$174.39 |
| Employee + 1 dep | \$1,871.68 | \$1,522.90 | \$348.78 |
| Employee + 2 dep | \$2,433.18 | \$1,979.78 | \$453.40 |
| ANTHEM TRADITIONAL | | | |
| Employee Only | \$1,307.86 | \$861.72 | \$446.14 |
| Employee + 1 dep | \$2,615.72 | \$1,723.43 | \$892.29 |
| Employee + 2 dep | \$3,400.44 | \$2,240.47 | \$1,159.97 |
| BLUE SHIELD ACCESS+ | | | |
| Employee Only | \$1,170.08 | \$742.18 | \$427.90 |
| Employee + 1 dep | \$2,340.16 | \$1,484.35 | \$855.81 |
| Employee + 2 dep | \$3,042.21 | \$1,929.67 | \$1,112.54 |
| BLUE SHIELD TRIO | | | |
| Employee Only | \$880.50 | \$672.34 | \$208.16 |
| Employee + 1 dep | \$1,761.00 | \$1,344.68 | \$416.32 |
| Employee + 2 dep | \$2,289.30 | \$1,748.09 | \$541.21 |
| CONTRA COSTA HEALTH PLAN | | | |
| Employee Only | \$1,248.54 | \$859.37 | \$389.17 |
| Employee + 1 dep | \$2,497.08 | \$1,718.73 | \$778.35 |
| Employee + 2 dep | \$3,246.20 | \$2,234.35 | \$1,011.85 |
| HEALTH NET SMARTCARE | | | |
| Employee Only | \$1,120.21 | \$824.45 | \$295.76 |
| Employee + 1 dep | \$2,240.42 | \$1,648.90 | \$591.52 |
| Employee + 2 dep | \$2,912.55 | \$2,143.58 | \$768.97 |
| KAISER PERMANENTE | | | |
| Employee Only | \$813.64 | \$671.17 | \$142.47 |
| Employee + 1 dep | \$1,627.28 | \$1,342.33 | \$284.95 |
| Employee + 2 dep | \$2,115.46 | \$1,745.04 | \$370.42 |
| PERS CHOICE | | | |
| Employee Only | \$935.84 | \$739.07 | \$196.77 |
| Employee + 1 dep | \$1,871.68 | \$1,478.14 | \$393.54 |
| Employee + 2 dep | \$2,433.18 | \$1,921.59 | \$511.59 |

Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Glenn, Humboldt, Lake, Lassen, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Placer, Plumas, Sacramento, San Benito, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Stanislaus, Sutter, Tehama, Trinity, Tuolumne, Yolo and Yuba Counties

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| | 2021 MONTHLY PREMIUM | 2021 COUNTY SUBSIDY | 2021 EMPLOYEE CONTRIBUTION |
|---------------------------------|----------------------------|---------------------------|----------------------------------|
| PERS SELECT | | | |
| Employee Only | \$566.67 | \$566.66 | \$0.01 |
| Employee + 1 dep | \$1,133.34 | \$1,133.33 | \$0.01 |
| Employee + 2 dep | \$1,473.34 | \$1,473.33 | \$0.01 |
| PERS CARE | | | |
| Employee Only | \$1,294.69 | \$881.38 | \$413.31 |
| Employee + 1 dep | \$2,589.38 | \$1,762.75 | \$826.63 |
| Employee + 2 dep | \$3,366.19 | \$2,291.58 | \$1,074.61 |
| PORAC | | | |
| Employee Only | \$799.00 | \$683.57 | \$115.43 |
| Employee + 1 dep | \$1,725.00 | \$1,459.64 | \$265.36 |
| Employee + 2 dep | \$2,199.00 | \$1,894.59 | \$304.41 |
| UNITED HEALTH CARE | | | |
| Employee Only | \$941.17 | \$666.82 | \$274.35 |
| Employee + 1 dep | \$1,882.34 | \$1,333.64 | \$548.70 |
| Employee + 2 dep | \$2,447.04 | \$1,733.74 | \$713.30 |
| WESTERN HEALTH ADVANTAGE | | | |
| Employee Only | \$757.02 | \$621.57 | \$135.45 |
| Employee + 1 dep | \$1,514.04 | \$1,243.14 | \$270.90 |
| Employee + 2 dep | \$1,968.25 | \$1,616.09 | \$352.16 |

Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Glenn, Humboldt, Lake, Lassen, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Placer, Plumas, Sacramento, San Benito, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Stanislaus, Sutter, Tehama, Trinity, Tuolumne, Yolo and Yuba Counties

DEDUCTIONS EFFECTIVE DECEMBER 1, 2020 - NOVEMBER 30, 2021

| | 2021 MONTHLY PREMIUM | 2021 COUNTY SUBSIDY | 2021 EMPLOYEE CONTRIBUTION |
|-------------------------------|----------------------------|---------------------------|----------------------------------|
| ANTHEM SELECT | | | |
| Employee Only | \$674.69 | \$631.93 | \$42.76 |
| Employee + 1 dep | \$1,349.38 | \$1,263.86 | \$85.52 |
| Employee + 2 dep | \$1,754.19 | \$1,643.03 | \$111.16 |
| ANTHEM TRADITIONAL | | | |
| Employee Only | \$1,046.04 | \$773.03 | \$273.01 |
| Employee + 1 dep | \$2,092.08 | \$1,546.06 | \$546.02 |
| Employee + 2 dep | \$2,719.70 | \$2,009.89 | \$709.81 |
| BLUE SHIELD ACCESS+ | | | |
| Employee Only | \$938.96 | \$791.72 | \$147.24 |
| Employee + 1 dep | \$1,877.92 | \$1,583.44 | \$294.48 |
| Employee + 2 dep | \$2,441.30 | \$2,058.48 | \$382.82 |
| BLUE SHIELD TRIO | | | |
| Employee Only | \$722.56 | \$666.56 | \$56.00 |
| Employee + 1 dep | \$1,445.12 | \$1,333.11 | \$112.01 |
| Employee + 2 dep | \$1,878.66 | \$1,733.05 | \$145.61 |
| HEALTH NET SALUD Y MAS | | | |
| Employee Only | \$458.66 | \$458.65 | \$0.01 |
| Employee + 1 dep | \$917.32 | \$917.31 | \$0.01 |
| Employee + 2 dep | \$1,192.52 | \$1,192.51 | \$0.01 |
| HEALTH NET SMARTCARE | | | |
| Employee Only | \$769.11 | \$716.19 | \$52.92 |
| Employee + 1 dep | \$1,538.22 | \$1,432.37 | \$105.85 |
| Employee + 2 dep | \$1,999.69 | \$1,862.09 | \$137.60 |
| KAISER PERMANENTE | | | |
| Employee Only | \$669.77 | \$666.56 | \$3.21 |
| Employee + 1 dep | \$1,339.54 | \$1,333.11 | \$6.43 |
| Employee + 2 dep | \$1,741.40 | \$1,733.05 | \$8.35 |
| PERS CHOICE | | | |
| Employee Only | \$783.19 | \$715.97 | \$67.22 |
| Employee + 1 dep | \$1,566.38 | \$1,431.93 | \$134.45 |
| Employee + 2 dep | \$2,036.29 | \$1,861.52 | \$174.77 |
| PERS SELECT | | | |
| Employee Only | \$476.92 | \$476.91 | \$0.01 |
| Employee + 1 dep | \$953.84 | \$953.83 | \$0.01 |
| Employee + 2 dep | \$1,239.99 | \$1,239.98 | \$0.01 |
| PERS CARE | | | |
| Employee Only | \$1,115.68 | \$850.75 | \$264.93 |
| Employee + 1 dep | \$2,231.36 | \$1,701.50 | \$529.86 |
| Employee + 2 dep | \$2,900.77 | \$2,211.96 | \$688.81 |
| PORAC | | | |
| Employee Only | \$749.00 | \$658.57 | \$90.43 |
| Employee + 1 dep | \$1,499.00 | \$1,346.64 | \$152.36 |
| Employee + 2 dep | \$1,960.00 | \$1,775.09 | \$184.91 |
| SHARP | | | |
| Employee Only | \$632.27 | \$621.57 | \$10.70 |
| Employee + 1 dep | \$1,264.54 | \$1,243.14 | \$21.40 |
| Employee + 2 dep | \$1,643.90 | \$1,616.09 | \$27.81 |
| UNITED HEALTH CARE | | | |
| Employee Only | \$723.84 | \$723.83 | \$0.01 |
| Employee + 1 dep | \$1,447.68 | \$1,447.67 | \$0.01 |
| Employee + 2 dep | \$1,881.98 | \$1,881.97 | \$0.01 |

| | DEDUCTIONS EFFECTIVE DECEMBER 1, 2020 - NOVEMBER 30, 2021 | | |
|-------------------------------|---|------------|--------------|
| | 2021 | 2021 | 2021 |
| | MONTHLY | COUNTY | EMPLOYEE |
| | PREMIUM | SUBSIDY | CONTRIBUTION |
| ANTHEM SELECT | | | |
| Employee Only | \$639.10 | \$621.57 | \$17.53 |
| Employee + 1 dep | \$1,278.20 | \$1,243.14 | \$35.06 |
| Employee + 2 dep | \$1,661.66 | \$1,616.09 | \$45.57 |
| ANTHEM TRADITIONAL | | | |
| Employee Only | \$984.21 | \$797.87 | \$186.34 |
| Employee + 1 dep | \$1,968.42 | \$1,595.73 | \$372.69 |
| Employee + 2 dep | \$2,558.95 | \$2,074.46 | \$484.49 |
| BLUE SHIELD ACCESS+ | | | |
| Employee Only | \$834.88 | \$780.08 | \$54.80 |
| Employee + 1 dep | \$1,669.76 | \$1,560.15 | \$109.61 |
| Employee + 2 dep | \$2,170.69 | \$2,028.21 | \$142.48 |
| BLUE SHIELD TRIO | | | |
| Employee Only | \$660.49 | \$639.35 | \$21.14 |
| Employee + 1 dep | \$1,320.98 | \$1,278.70 | \$42.28 |
| Employee + 2 dep | \$1,717.27 | \$1,662.32 | \$54.95 |
| HEALTH NET SALUD Y MAS | | | |
| Employee Only | \$412.88 | \$412.87 | \$0.01 |
| Employee + 1 dep | \$825.76 | \$825.75 | \$0.01 |
| Employee + 2 dep | \$1,073.49 | \$1,073.48 | \$0.01 |
| HEALTH NET SMARTCARE | | | |
| Employee Only | \$691.48 | \$629.97 | \$61.51 |
| Employee + 1 dep | \$1,382.96 | \$1,259.94 | \$123.02 |
| Employee + 2 dep | \$1,797.85 | \$1,637.93 | \$159.92 |
| KAISER PERMANENTE | | | |
| Employee Only | \$669.84 | \$669.83 | \$0.01 |
| Employee + 1 dep | \$1,339.68 | \$1,339.67 | \$0.01 |
| Employee + 2 dep | \$1,741.58 | \$1,741.57 | \$0.01 |
| PERS CHOICE | | | |
| Employee Only | \$761.23 | \$709.60 | \$51.63 |
| Employee + 1 dep | \$1,522.46 | \$1,419.19 | \$103.27 |
| Employee + 2 dep | \$1,979.20 | \$1,844.96 | \$134.24 |
| PERS SELECT | | | |
| Employee Only | \$459.94 | \$459.93 | \$0.01 |
| Employee + 1 dep | \$919.88 | \$919.87 | \$0.01 |
| Employee + 2 dep | \$1,195.84 | \$1,195.83 | \$0.01 |
| PERS CARE | | | |
| Employee Only | \$1,036.07 | \$816.05 | \$220.02 |
| Employee + 1 dep | \$2,072.14 | \$1,632.10 | \$440.04 |
| Employee + 2 dep | \$2,693.78 | \$2,121.74 | \$572.04 |

| | DEDUCTIONS EFFECTIVE DECEMBER 1, 2020 - NOVEMBER 30, 2021 | | |
|---------------------------|---|-------------------|--------------------------|
| | 2021 | 2021 | 2021 |
| | MONTHLY PREMIUM | COUNTY SUBSIDY | EMPLOYEE CONTRIBUTION |
| PORAC | | | |
| Employee Only | \$725.00 | \$646.57 | \$78.43 |
| Employee + 1 dep | \$1,450.00 | \$1,322.14 | \$127.86 |
| Employee + 2 dep | \$1,894.00 | \$1,742.09 | \$151.91 |
| UNITED HEALTH CARE | | | |
| Employee Only | \$720.89 | \$720.88 | \$0.01 |
| Employee + 1 dep | \$1,441.78 | \$1,441.77 | \$0.01 |
| Employee + 2 dep | \$1,874.31 | \$1,874.30 | \$0.01 |

**2021 CALPERS MONTHLY PREMIUMS
OUT OF STATE REGION**

**EMPLOYEES REPRESENTED BY IAFF LOCAL 1230
BARGAINING UNIT 4N**

DEDUCTIONS EFFECTIVE DECEMBER 1, 2020 - NOVEMBER 30, 2021

| | 2021 MONTHLY PREMIUM | 2021 COUNTY SUBSIDY | 2021 EMPLOYEE CONTRIBUTION |
|--------------------------|---|--|---|
| KAISER PERMANENTE | | | |
| Employee Only | \$1,040.15 | \$680.26 | \$359.89 |
| Employee + 1 dep | \$2,080.30 | \$1,360.51 | \$719.79 |
| Employee + 2 dep | \$2,704.39 | \$1,768.67 | \$935.72 |
| PERS CHOICE | | | |
| Employee Only | \$760.17 | \$674.87 | \$85.30 |
| Employee + 1 dep | \$1,520.34 | \$1,349.73 | \$170.61 |
| Employee + 2 dep | \$1,976.44 | \$1,754.66 | \$221.78 |
| PERS CARE | | | |
| Employee Only | \$1,008.08 | \$764.24 | \$243.84 |
| Employee + 1 dep | \$2,016.16 | \$1,528.48 | \$487.68 |
| Employee + 2 dep | \$2,621.01 | \$1,987.04 | \$633.97 |
| PORAC | | | |
| Employee Only | \$899.00 | \$733.57 | \$165.43 |
| Employee + 1 dep | \$1,850.00 | \$1,522.14 | \$327.86 |
| Employee + 2 dep | \$2,223.00 | \$1,906.59 | \$316.41 |