



2026 Premium Sharing Worksheet

Plan	Single	2-Party	Family
Anthem Blue Cross Select HMO	\$1,336.29	\$2,672.58	\$3,474.35
Anthem Blue Cross Traditional HMO	\$1,612.08	\$3,224.16	\$4,191.41
Blue Shield Access+ HMO	\$1,301.95	\$2,603.90	\$3,385.07
Blue Shield Access+ EPO	\$1,301.95	\$2,603.90	\$3,385.07
Blue Shield Trio HMO	\$1,166.58	\$2,333.16	\$3,033.11
Kaiser Permanente	\$1,168.86	\$2,337.72	\$3,039.04
Peace Officers Research Assoc. of CA	\$1,063.00	\$2,418.00	\$3,027.00
PERS Gold	\$1,120.58	\$2,241.16	\$2,913.51
PERS Platinum	\$1,670.14	\$3,340.28	\$4,342.36
UnitedHealthcare SignatureValue Alliance	\$1,290.06	\$2,580.12	\$3,354.16
UnitedHealthcare SignatureValue Harmony	\$1,133.09	\$2,266.18	\$2,946.03
Western Health Advantage HMO	\$969.58	\$1,939.16	\$2,520.91
City's Contribution towards AFSCME Local 512, Local 1, and MCP Health Premiums – 2025 Kaiser Rates	\$1,112.90	\$2,225.80	\$2,893.54
City's Contribution towards PPEA Health Premiums – 2024 Kaiser Rates	\$1,021.41	2042.82	2655.67

Please visit the CalPERS website (www.calpers.ca.gov) for plan details, including plan eligibility*, by selecting the following: Members > Health Benefits > Plans & Rates.

You may plug in your numbers below to help you to compare premiums:

	Ex. Kaiser	Ex. Kaiser	
Monthly Premium	Family	Family	\$
	\$3,039.04	\$3,039.04	
City's Contribution	- (2893.54)	- (2655.67)	-
Your Share of the Monthly Premium (taken in two equal payments)	\$145.50	\$383.37	\$