2020 State Health Premiums Health Maintenance Organization Plans Only

June PHBC Final Proposed Premiums

Basic (B)		2019			Percent		
	Single	2-Party	Family	Single	2-Party	Family	Change
Anthem HMO Select	\$742.89	\$1,485.78	\$1,931.51	\$787.79	\$1,575.58	\$2,048.25	6.04%
Anthem HMO Traditional	1,034.48	2,068.96	2,689.65	1,115.75	2,231.50	2,900.95	7.86%
Blue Shield Access+	799.03	1,598.06	2,077.48	910.16	1,820.32	2,366.42	13.91%
Blue Shield Trio				701.06	1,402.12	1,822.76	N/A
Health Net Salud y Más	376.89	753.78	979.91	403.55	807.10	1,049.23	7.07%
Health Net SmartCare	728.70	1,457.40	1,894.62	860.96	1,721.92	2,238.50	18.15%
Kaiser CA	708.39	1,416.78	1,841.81	730.05	1,460.10	1,898.13	3.06%
Kaiser Out of State	964.68	1,929.36	2,508.17	995.19	1,990.38	2,587.49	3.16%
Sharp	593.66	1,187.32	1,543.52	606.02	1,212.04	1,575.65	2.08%
UnitedHealthcare	695.77	1,391.54	1,809.00	726.95	1,453.90	1,890.07	4.48%
Western Health Advantage	706.79	1,413.58	1,837.65	731.96	1,463.92	1,903.10	3.56%

Total HMO Basic Change 5.98%

Medicare (M)		2019			Percent		
	Single	2-Party	Family	Single	2-Party	Family	Change
Anthem HMO Select				\$388.15	\$776.30	\$1,164.45	N/A
Anthem Traditional	\$357.44	\$714.88	\$1,072.32	388.15	776.30	1,164.45	8.59%
Kaiser CA	323.74	647.48	971.22	339.43	678.86	1,018.29	4.85%
Kaiser Out of State	323.74	647.48	971.22	339.43	678.86	1,018.29	4.85%
UnitedHealthcare	299.37	598.74	898.11	327.03	654.06	981.09	9.24%

Total HMO Medicare Change 6.08%

		2020						
Combination Plans	Subscriber in M & 1 Dependent in B	Subscriber in M & 2+ Dependents in B	Subscriber in M, 1 Dependent in B & 1 Dependent in M	Subscriber in B & 1 Dependent in M	Subscriber in B & 2+ Dependents in M	Subscriber in B, 1 Dependent in B & 1 Dependent in M		
Anthem HMO Select	\$1,175.94	\$1,648.61	\$1,248.97	\$1,175.94	\$1,564.09	\$1,648.61		
Anthem HMO Traditional	1,503.90	2,173.35	1,445.75	1,503.90	1,892.05	2,173.35		
Kaiser	1,069.48	1,507.51	1,116.89	1,069.48	1,408.91	1,507.51		
Kaiser Out of State	1,334.62	1,931.73	1,275.97	1,334.62	1,674.05	1,931.73		
UnitedHealthcare	1,053.98	1,490.15	1,090.23	1,053.98	1,381.01	1,490.15		

2020 State Health Premiums Preferred Provider Organization (PPO) Plans Only

June PHBC Final Proposed Premiums

Basic (B)	2019				Percent		
	Single	2-Party	Family	Single	2-Party	Family	Change
Anthem EPO Del Norte	\$764.78	\$1,529.56	\$1,988.43	\$787.00	\$1,574.00	\$2,046.20	2.91%
PERS Choice	764.78	1,529.56	1,988.43	787.00	1,574.00	2,046.20	2.91%
PERS Select	492.24	984.48	1,279.82	492.24	984.48	1,279.82	0.00%
PERSCare	929.89	1,859.78	2,417.71	989.88	1,979.76	2,573.69	6.45%

Total PPO Basic Change 3.28%

Madiagra (M)		2019			Percent		
Medicare (M)	Single	2-Party	Family	Single	2-Party	Family	Change
PERS Choice	\$360.41	\$720.82	\$1,081.23	\$351.39	\$702.78	\$1,054.17	-2.50%
PERS Select	360.41	720.82	1,081.23	351.39	702.78	1,054.17	-2.50%
PERSCare	394.83	789.66	1,184.49	384.78	769.56	1,154.34	-2.55%

Total PPO Medicare Change -2.52%

			20	20						
Combination Plans	Subscriber in M & 1 Dependent in B	Subscriber in M & 2+ Dependents in B	Subscriber in M, 1 Dependent in B & 1 Dependent in M	Subscriber in B & 1 Dependent in M	Subscriber in B & 2+ Dependents in M	Subscriber in B, 1 Dependent in B & 1 Dependent in M				
PERS Choice	\$1,138.39	\$1,610.59	\$1,174.98	\$1,138.39	\$1,489.78	\$1,610.59				
PERS Select	843.63	1,138.97	998.12	843.63	1,195.02	1,138.97				
PERSCare	1,374.66	1,968.59	1,363.49	1,374.66	1,759.44	1,968.59				

2020 100/90 and 80/80 State Annuitant Contributions

June PHBC Final Proposed Premiums

The 2020 maximum State Contribution amounts for annuitants under the **100/90 and 80/80 Contribution Formulas** are as follows:

Contribution Formula	100/90	80/80			
Plan Type	Basic or Medicare	Basic	Medicare		
One-Party Coverage	\$767	\$609	\$282		
Two Party Coverage	1,461	1,223	562		
Family Coverage	1,868	1,585	845		