

BRIDGE-TO-MEDICARE PLAN		POST '97 RETIREES - SUBSIDY	
2019 SUBSIDY RATES	MEMBER ONLY	MEMBER + SP/DP	
ACE	\$400.00	\$800.00	
AMA	\$451.00	\$902.00	
CONFIDENTIALS	\$400.00	\$800.00	
CSEA	\$400.00	\$800.00	
FA (FACULTY)	\$400.00	\$800.00	
FA (CHILD DEVELOPMENT)	\$400.00	\$800.00	
FHDA-POA	\$400.00	\$800.00	
TEAMSTERS	\$400.00	\$800.00	
IMPORTANT: COVERAGE ENDS AS RETIREE REACHES			

BRIDGE TO MEDICARE PLAN						ACE//CONFIDENTIALS/CSEA/FA/FA-Child Development/POA/Teamsters	AMA		
CalPERS BASIC MONTHLY RATE	PARTY CODE	PLAN CODE	*Monthly MEDICAL Premium	**Monthly DENTAL & VISION Premium	COMBINED MEDICAL & DENTAL/VISION COST	LESS: Subsidy Amt	Net Cost to Retiree Medical/Dental/Vision	LESS: Subsidy Amt	Retiree Medical/Dental/Vision
PERSCare									
Member Only	1	122	\$1,131.68	\$77.54	\$1,209.22	(\$400.00)	\$809.22	(\$451.00)	\$758.22
Member + SP/DP	2	122	\$2,263.36	\$155.09	\$2,418.45	(\$800.00)	\$1,618.45	(\$902.00)	\$1,516.45
PERS Choice									
Member Only	1	106	\$866.27	\$77.54	\$943.81	(\$400.00)	\$543.81	(\$451.00)	\$492.81
Member + SP/DP	2	106	\$1,732.54	\$155.09	\$1,887.63	(\$800.00)	\$1,087.63	(\$902.00)	\$985.63
PERS Select									
Member Only	1	126	\$543.19	\$77.54	\$620.73	(\$400.00)	\$220.73	(\$451.00)	\$169.73
Member + SP/DP	2	126	\$1,086.38	\$155.09	\$1,241.47	(\$800.00)	\$441.47	(\$902.00)	\$339.47
Anthem Select HMO									
Member Only	1	454	\$831.44	\$77.54	\$908.98	(\$400.00)	\$508.98	(\$451.00)	\$457.98
Member + SP/DP	2	454	\$1,662.88	\$155.09	\$1,817.97	(\$800.00)	\$1,017.97	(\$902.00)	\$915.97
Anthem Traditional HMO									
Member Only	1	450	\$1,111.13	\$77.54	\$1,188.67	(\$400.00)	\$788.67	(\$451.00)	\$737.67
Member + SP/DP	2	450	\$2,222.26	\$155.09	\$2,377.35	(\$800.00)	\$1,577.35	(\$902.00)	\$1,475.35
Kaiser									
Member Only	1	104	\$768.25	\$77.54	\$845.79	(\$400.00)	\$445.79	(\$451.00)	\$394.79
Member + SP/DP	2	104	\$1,536.50	\$155.09	\$1,691.59	(\$800.00)	\$891.59	(\$902.00)	\$789.59
PORAC									
Member Only	1	207	\$774.00	\$77.54	\$851.54	(\$400.00)	\$451.54	(\$451.00)	\$400.54
Member + SP/DP	2	207	\$1,623.00	\$155.09	\$1,778.09	(\$800.00)	\$978.09	(\$902.00)	\$876.09
Health Net SmartCare HMO									
Member Only	1	408	\$901.55	\$77.54	\$979.09	(\$400.00)	\$579.09	(\$451.00)	\$528.09
Member + SP/DP	2	408	\$1,803.10	\$155.09	\$1,958.19	(\$800.00)	\$1,158.19	(\$902.00)	\$1,056.19
Health Net Salud HMO y Mas (Based on LA rates)									
Member Only	1	443	\$356.50	\$77.54	\$434.04	(\$400.00)	\$34.04	(\$451.00)	(\$16.96)
Member + SP/DP	2	443	\$713.00	\$155.09	\$868.09	(\$800.00)	\$68.09	(\$902.00)	(\$33.91)
SHARP HMO (San Diego County Only)									
Member Only	1	420	\$593.66	\$77.54	\$671.20	(\$400.00)	\$271.20	(\$451.00)	\$220.20
Member + SP/DP	2	420	\$1,187.32	\$155.09	\$1,342.41	(\$800.00)	\$542.41	(\$902.00)	\$440.41
Western Health Advantage									
Member Only	1	179	\$767.01	\$77.54	\$844.55	(\$400.00)	\$444.55	(\$451.00)	\$393.55
Member + SP/DP	2	179	\$1,534.02	\$155.09	\$1,689.11	(\$800.00)	\$889.11	(\$902.00)	\$787.11

*Medical premium is collected by CalPERS
 **Dental and Vision premium is collected by FHDA