

**Foothill – De Anza Community College District
Surviving Spouse Rates 2026**

PERS Platinum PPO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,670.14	\$74.94	\$1,745.08
2 Party	\$3,340.28	\$149.87	\$3,490.15
Family	\$4,342.36	\$209.82	\$4,552.18
PERS Platinum Medicare Supplement	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$665.50	\$74.94	\$740.44
2 Party	\$1,331.00	\$149.87	\$1,480.87
Family	\$1,996.50	\$209.82	\$2,206.32
PERS Gold PPO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,120.58	\$74.94	\$1,195.52
2 Party	\$2,241.16	\$149.87	\$2,391.03
Family	\$2,913.51	\$209.82	\$3,123.33
PERS Gold Medicare Supplement	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$597.57	\$74.94	\$672.51
2 Party	\$1,195.14	\$149.87	\$1,345.01
Family	\$1,792.71	\$209.82	\$2,002.53
Kaiser HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,168.86	\$74.94	\$1,243.80
2 Party	\$2,337.72	\$149.87	\$2,487.59
Family	\$3,039.04	\$209.82	\$3,248.86
Kaiser Out of State HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,398.96	\$74.94	\$1,473.90
2 Party	\$2,797.92	\$149.87	\$2,947.79
Family	\$3,637.30	\$209.82	\$3,847.12
Kaiser Senior Advantage HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$356.83	\$74.94	\$431.77
2 Party	\$713.66	\$149.87	\$863.53
Family	\$1,070.49	\$209.82	\$1,280.31

NOTE: Medical monthly premium is collected by CalPERS. Dental & Vision monthly premiums are offset against your EFT account set up through WEX on behalf of FHDA

**Foothill – De Anza Community College District
Surviving Spouse Rates 2026**

Kaiser Senior Advantage Out of State HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$350.16	\$74.94	\$425.10
2 Party	\$700.32	\$149.87	\$850.19
Family	\$1,050.48	\$209.82	\$1,260.30
Kaiser Senior Advantage Summit HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$426.31	\$74.94	\$501.25
2 Party	\$852.62	\$149.87	\$1,002.49
Family	\$1,278.93	\$209.82	\$1,488.75
Kaiser Senior Advantage Summit Out of State HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$419.67	\$74.94	\$494.61
2 Party	\$839.34	\$149.87	\$989.21
Family	\$1,259.01	\$209.82	\$1,468.83
Anthem Select HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,336.29	\$74.94	\$1,411.23
2 Party	\$2,672.58	\$149.87	\$2,822.45
Family	\$3,474.35	\$209.82	\$3,684.17
Anthem Traditional HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,612.08	\$74.94	\$1,687.02
2 Party	\$3,224.16	\$149.87	\$3,374.03
Family	\$4,191.41	\$209.82	\$4,401.23
Anthem Medicare Preferred PPO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$571.70	\$74.94	\$646.64
2 Party	\$1,143.40	\$149.87	\$1,293.27
Family	\$1,715.10	\$209.82	\$1,924.92
Blue Shield Access+ HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,301.95	\$74.94	\$1,376.89
2 Party	\$2,603.90	\$149.87	\$2,753.77
Family	\$3,385.07	\$209.82	\$3,594.89
Blue Shield Trio HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,166.58	\$74.94	\$1,241.52
2 Party	\$2,333.16	\$149.87	\$2,483.03
Family	\$3,033.11	\$209.82	\$3,242.93

NOTE: Medical monthly premium is collected by CalPERS. Dental & Vision monthly premiums are offset against your EFT account set up through WEX on behalf of FHDA

**Foothill – De Anza Community College District
Surviving Spouse Rates 2026**

Blue Shield Medicare PPO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$539.43	\$74.94	\$614.37
2 Party	\$1,078.86	\$149.87	\$1,228.73
Family	\$1,618.29	\$209.82	\$1,828.11
UnitedHealthCare Signature Alliance HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,290.06	\$74.94	\$1,365.00
2 Party	\$2,580.12	\$149.87	\$2,729.99
Family	\$3,354.16	\$209.82	\$3,563.98
UnitedHealthCare Harmony HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,133.09	\$74.94	\$1,208.03
2 Party	\$2,266.18	\$149.87	\$2,416.05
Family	\$2,946.03	\$209.82	\$3,155.85
UnitedHealthCare Group Medicare Advantage PPO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$481.29	\$74.94	\$556.23
2 Party	\$962.58	\$149.87	\$1,112.45
Family	\$1,443.87	\$209.82	\$1,653.69
Western Health Advantage HMO	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$969.58	\$74.94	\$1,044.52
2 Party	\$1,939.16	\$149.87	\$2,089.03
Family	\$2,520.91	\$209.82	\$2,730.73
PORAC	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$1,063.00	\$74.94	\$1,137.94
2 Party	\$2,418.00	\$149.87	\$2,567.87
Family	\$3,027.00	\$209.82	\$3,236.82
PORAC Medicare	CalPERS Rates	Dental/Vision	Medical/Dental/Vision
Single	\$597.00	\$74.94	\$671.94
2 Party	\$1,322.00	\$149.87	\$1,471.87
Family	\$1,791.00	\$209.82	\$2,000.82

NOTE: Medical monthly premium is collected by CalPERS. Dental & Vision monthly premiums are offset against your EFT account set up through WEX on behalf of FHDA