ORANGE UNIFIED SCHOOL DISTRICT

Risk Management

1401 North Handy Street - Orange, CA 92867-4334 Phone: 714.628.5390

LEADERSHIP RETIREE MONTHLY RATES FOR LIFETIME AND OPTION B UNDER 65
Rates include medical, dental, and vision
Valid: 10/01/2025 - 09/30/2026

ANTHEM BLUE CROSS LARGER NETWORK PPO	HIGH (90/10) PPO PLAN W/ PPO DENTAL	LOW (80/20) PPO PLAN W/ PPO DENTAL
SINGLE	$406	$268
2 PARTY	$809	$524
FAMILY	$1116	$743
ANTHEM BLUE CROSS LARGER NETWORK HMO	**CALIFORNIACARE W/ HMO DENTAL**	**CALIFORNIACARE W/ PPO DENTAL**
SINGLE	$169	$202
2 PARTY	$322	$388
FAMILY	$466	$565
ANTHEM BLUE CROSS LARGE NETWORK HMO	**SELECT W/ HMO DENTAL**	**SELECT W/ PPO DENTAL**
SINGLE	$112	$145
2 PARTY	$204	$270
FAMILY	$312	$411
ANTHEM BLUE CROSS NARROW NETWORK HMO	**VIVITY W/ HMO DENTAL**	**VIVITY W/ PPO DENTAL**
SINGLE	$112	$145
2 PARTY	$205	$271
FAMILY	$312	$411
KAISER PERMANENTE	**KAISER W/ HMO DENTAL**	**KAISER W/ PPO DENTAL**
SINGLE	$239	$272
2 PARTY	$463	$529
FAMILY	$639	$738

Based on 10/2025 Calendar Year SISC Premiums and Board Approved District Caps Effective 10/01/2025

ORANGE UNIFIED SCHOOL DISTRICT

Risk Management

1401 North Handy Street - Orange, CA 92867-4334 Phone: 714.628.5390

LEADERSHIP RETIREE MONTHLY RATES FOR LIFETIME OVER 65 IN MEDICARE
Rates include medical, dental, and vision
NOTE EFFECTIVE DATES ON EACH PLAN

ANTHEM BLUE CROSS	OUSD MEDICARE ADVANTAGE + PART D (MAPD) W/ PPO DENTAL
	Effective January 1 - December 31
SINGLE	$0
2 PARTY	$0
FAMILY	$0

	HARTFORD SUPPLEMENT TO MEDICARE PLAN WITH RX W/ PPO DENTAL
	Effective January 1 - December 31
SINGLE	$0
2 PARTY	$0

	COMPANIONCARE SUPPLEMENT TO MEDICARE PLAN WITH RX W/ PPO DENTAL
	Effective October 1 - September 30
SINGLE	$0
2 PARTY	$0

KAISER PERMANENTE	SENIOR ADVANTAGE W/ HMO DENTAL	SENIOR ADVANTAGE W/ PPO DENTAL
	Effective October 1 - September 30	
SINGLE	$0	$0
2 PARTY	$0	$0

Based on 10/2025 Calendar Year SISC Premiums and
Board Approved District Caps Effective 10/01/2025

ORANGE UNIFIED SCHOOL DISTRICT

Risk Management

1401 North Handy Street - Orange, CA 92867-4334 Phone: 714.628.5390

LEADERSHIP RETIREE MONTHLY RATES FOR LIFETIME AND OPTION B - COMBINATION
A retiree and dependent(s) over 65 in Medicare and under 65
Rates include medical, dental, and vision
Medicare Advantage + Part D RX Rates Are Effective: January 1 - December 31

ANTHEM BLUE CROSS LARGER NETWORK PPO	HIGH (90/10) + OUSD MAPD W/ PPO DENTAL	LOW (80/20) + OUSD MAPD W/ PPO DENTAL
1 over 65 and 1 under 65	$63	$0
1 over 65 and 2 under 65	$793	$508
1 over 65 and 3 under 65	$1116	$743
2 over 65 and 1 under 65	$46	$0

ANTHEM BLUE CROSS LARGER NETWORK HMO	CALIFORNIACARE + OUSD MAPD W/ HMO DENTAL	CALIFORNIACARE + OUSD MAPD W/ PPO DENTAL
1 over 65 and 1 under 65	$0	$0
1 over 65 and 2 under 65	$273	$372
1 over 65 and 3 under 65	$466	$565
2 over 65 and 1 under 65	$0	$0

ANTHEM BLUE CROSS LARGE NETWORK HMO	SELECT + OUSD MAPD W/ HMO DENTAL	SELECT + OUSD MAPD W/ PPO DENTAL
1 over 65 and 1 under 65	$0	$0
1 over 65 and 2 under 65	$155	$254
1 over 65 and 3 under 65	$312	$411
2 over 65 and 1 under 65	$0	$0

ANTHEM BLUE CROSS NARROW NETWORK HMO	VIVITY + OUSD MAPD W/ HMO DENTAL	VIVITY + OUSD MAPD W/ PPO DENTAL
1 over 65 and 1 under 65	$0	$0
1 over 65 and 2 under 65	$156	$255
1 over 65 and 3 under 65	$312	$411
2 over 65 and 1 under 65	$0	$0

KAISER PERMANENTE	KAISER + KAISER SENIOR ADVANTAGE W/ HMO DENTAL	KAISER + KAISER SENIOR ADVANTAGE W/ PPO DENTAL
1 over 65 and 1 under 65	$0	$0
2 over 65 and 1 under 65	$0	$0
1 over 65 and 2+ under 65	$0	$27

Based on 10/2025 Calendar Year SISC Premiums and
Board Approved District Caps Effective 10/01/2025

Rev. 06.19.2025 dg

ORANGE UNIFIED SCHOOL DISTRICT

Risk Management

1401 North Handy Street - Orange, CA 92867-4334 Phone: 714.628.5390

LEADERSHIP RETIREE MONTHLY RATES FOR BRIDGE UNDER 65
Rates include medical, dental, and vision*
Valid: 10/01/2025 - 09/30/2026

ANTHEM BLUE CROSS LARGER NETWORK PPO	HIGH (90/10) PPO PLAN W/ PPO DENTAL	LOW (80/20) PPO PLAN W/ PPO DENTAL
SINGLE	$406	$268
2 PARTY	$1548	$1263
FAMILY	$2264	$1891
ANTHEM BLUE CROSS LARGER NETWORK HMO	**CALIFORNIACARE W/ HMO DENTAL**	**CALIFORNIACARE W/ PPO DENTAL**
SINGLE	$169	$202
2 PARTY	$1060	$1127
FAMILY	$1614	$1713
ANTHEM BLUE CROSS LARGE NETWORK HMO	**SELECT W/ HMO DENTAL**	**SELECT W/ PPO DENTAL**
SINGLE	$112	$145
2 PARTY	$942	$1009
FAMILY	$1460	$1559
ANTHEM BLUE CROSS NARROW NETWORK HMO	**VIVITY W/ HMO DENTAL**	**VIVITY W/ PPO DENTAL**
SINGLE	$112	$145
2 PARTY	$943	$1010
FAMILY	$1460	$1559
KAISER PERMANENTE	**KAISER W/ HMO DENTAL**	**KAISER W/ PPO DENTAL**
SINGLE	$239	$272
2 PARTY	$1201	$1268
FAMILY	$1787	$1886

*This group of retirees receives the District's Single Contribution (CAP).

Based on 10/2025 Calendar Year SISC Premiums and Board Approved District Caps Effective 10/01/2025

ORANGE UNIFIED SCHOOL DISTRICT

Risk Management

1401 North Handy Street - Orange, CA 92867-4334 Phone: 714.628.5390

LEADERSHIP RETIREE MONTHLY RATES FOR BRIDGE - COMBINATION
A retiree and dependent(s) over 65 in Medicare and under 65
Rates include medical, dental, and vision*
Medicare Advantage + Part D RX Rates Are Effective: January 1 - December 31

ANTHEM BLUE CROSS LARGER NETWORK PPO	HIGH (90/10) + OUSD MAPD W/ PPO DENTAL	LOW (80/20) + OUSD MAPD W/ PPO DENTAL
1 over 65 and 1 under 65	$801	$663
1 over 65 and 2 under 65	$1941	$1656
1 over 65 and 3 under 65	$2264	$1891
2 over 65 and 1 under 65	$1194	$1056

ANTHEM BLUE CROSS LARGER NETWORK HMO	CALIFORNIACARE + OUSD MAPD W/ HMO DENTAL	CALIFORNIACARE + OUSD MAPD W/ PPO DENTAL
1 over 65 and 1 under 65	$530	$597
1 over 65 and 2 under 65	$1421	$1520
1 over 65 and 3 under 65	$1614	$1713
2 over 65 and 1 under 65	$891	$990

ANTHEM BLUE CROSS LARGER NETWORK PPO	SELECT + OUSD MAPD W/ HMO DENTAL	SELECT + OUSD MAPD W/ PPO DENTAL
1 over 65 and 1 under 65	$473	$540
1 over 65 and 2 under 65	$1303	$1402
1 over 65 and 3 under 65	$1460	$1559
2 over 65 and 1 under 65	$834	$933

ANTHEM BLUE CROSS NARROW NETWORK HMO	VIVITY + OUSD MAPD W/ HMO DENTAL	VIVITY + OUSD MAPD W/ PPO DENTAL
1 over 65 and 1 under 65	$473	$540
1 over 65 and 2 under 65	$1304	$1403
1 over 65 and 3 under 65	$1460	$1559
2 over 65 and 1 under 65	$834	$933

KAISER PERMANENTE	KAISER + KAISER SENIOR ADVANTAGE W/ HMO DENTAL	KAISER + KAISER SENIOR ADVANTAGE W/ PPO DENTAL
1 over 65 and 1 under 65	$490	$557
2 over 65 and 1 under 65	$394	$493
1 over 65 and 2+ under 65	$1076	$1175

*This group of retirees receives the District's Single Contribution (CAP).

Based on 10/2025 Calendar Year SISC Premiums and
Board Approved District Caps Effective 10/01/2025