

CalPERS 2026 BASIC MONTHLY PREMIUM RATES

CCEE Monthly Cap: \$1,220.80 - effective 1.1.2026

Rates based on Region 1*

Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Glenn, Humboldt, Lake,
Lassen, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Placer, Plumas, Sacramento,
San Benito, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano,
Sonoma, Stanislaus, Sutter, Tehama, Trinity, Tuolumne, Yolo, Yuba

Monthly Rates			Monthly Employer Contribution	Monthly Employee Contribution
Anthem Blue Cross Select HMO	Employee	\$1,336.29	\$1,220.80	\$115.49
	2-Party	\$2,672.58	\$1,220.80	\$1,451.78
	Family	\$3,474.35	\$1,220.80	\$2,253.55
Anthem Blue Cross Traditional HMO	Employee	\$1,612.08	\$1,220.80	\$391.28
	2-Party	\$3,224.16	\$1,220.80	\$2,003.36
	Family	\$4,191.41	\$1,220.80	\$2,970.61
Blue Shield Access+ HMO	Employee	\$1,301.95	\$1,220.80	\$81.15
	2-Party	\$2,603.90	\$1,220.80	\$1,383.10
	Family	\$3,385.07	\$1,220.80	\$2,164.27
Blue Shield Access+ EPO	Employee	\$1,301.95	\$1,220.80	\$81.15
	2-Party	\$2,603.90	\$1,220.80	\$1,383.10
	Family	\$3,385.07	\$1,220.80	\$2,164.27
Blue Shield Trio HMO*	Employee	\$1,166.58	\$1,166.58	\$0.00
	2-Party	\$2,333.16	\$1,220.80	\$1,112.36
	Family	\$3,033.11	\$1,220.80	\$1,812.31
Kaiser Permanente	Employee	\$1,168.86	\$1,168.86	\$0.00
	2-Party	\$2,337.72	\$1,220.80	\$1,116.92
	Family	\$3,039.04	\$1,220.80	\$1,818.24
PERS Gold	Employee	\$1,120.58	\$1,120.58	\$0.00
	2-Party	\$2,241.16	\$1,220.80	\$1,020.36
	Family	\$2,913.51	\$1,220.80	\$1,692.71
PERS Platinum	Employee	\$1,670.14	\$1,220.80	\$449.34
	2-Party	\$3,340.28	\$1,220.80	\$2,119.48
	Family	\$4,342.36	\$1,220.80	\$3,121.56
United Healthcare Signature Value Alliance	Employee	\$1,290.06	\$1,220.80	\$69.26
	2-Party	\$2,580.12	\$1,220.80	\$1,359.32
	Family	\$3,354.16	\$1,220.80	\$2,133.36
United Healthcare Signature Value Harmony	Employee	\$1,133.09	\$1,133.09	\$0.00
	2-Party	\$2,266.18	\$1,220.80	\$874.78
	Family	\$2,946.03	\$1,220.80	\$1,437.21
Western Health Advantage HMO	Employee	\$969.58	\$969.58	\$0.00
	2-Party	\$1,939.16	\$1,220.80	\$718.36
	Family	\$2,520.91	\$1,220.80	\$1,300.11

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CalPERS 2026 BASIC MONTHLY PREMIUM RATES
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Rates based on Region 2*

Fresno, Imperial, Inyo, Kern, Kings, Madera, Orange, San Diego, San Luis Obispo, Santa Barbara, Tulare, Ventura

Monthly Rates			Monthly Employer Contribution	Monthly Employee Contribution
Anthem Blue Cross Select HMO	Employee	\$1,016.32	\$1,016.32	\$0.00
	2-Party	\$2,032.64	\$1,220.80	\$811.84
	Family	\$2,642.43	\$1,220.80	\$1,421.63
Anthem Blue Cross Traditional HMO	Employee	\$1,158.26	\$1,158.26	\$0.00
	2-Party	\$2,316.52	\$1,220.80	\$1,095.72
	Family	\$3,011.48	\$1,220.80	\$1,790.68
Blue Shield Access+ HMO	Employee	\$1,052.89	\$1,052.89	\$0.00
	2-Party	\$2,105.78	\$1,220.80	\$884.98
	Family	\$2,737.51	\$1,220.80	\$1,516.71
Blue Shield Access+ EPO	Employee	\$1,052.89	\$1,052.89	\$0.00
	2-Party	\$2,105.78	\$1,220.80	\$884.98
	Family	\$2,737.51	\$1,220.80	\$1,516.71
Blue Shield Trio HMO*	Employee	\$936.58	\$936.58	\$0.00
	2-Party	\$1,873.16	\$1,220.80	\$652.36
	Family	\$2,435.11	\$1,220.80	\$1,214.31
Health Net Salud y Más	Employee	\$879.57	\$879.57	\$0.00
	2-Party	\$1,759.14	\$1,220.80	\$538.34
	Family	\$2,286.88	\$1,220.80	\$1,066.08
Kaiser Permanente	Employee	\$987.69	\$987.69	\$0.00
	2-Party	\$1,975.38	\$1,220.80	\$754.58
	Family	\$2,567.99	\$1,220.80	\$1,347.19
PERS Gold	Employee	\$956.28	\$956.28	\$0.00
	2-Party	\$1,912.56	\$1,220.80	\$691.76
	Family	\$2,486.33	\$1,220.80	\$1,265.53
PERS Platinum	Employee	\$1,426.24	\$1,220.80	\$205.44
	2-Party	\$2,852.48	\$1,220.80	\$1,631.68
	Family	\$3,708.22	\$1,220.80	\$2,487.42
Sharp Performance Plus ^	Employee	\$916.20	\$916.20	\$0.00
	2-Party	\$1,832.40	\$1,220.80	\$611.60
	Family	\$2,382.12	\$1,220.80	\$1,161.32
United Healthcare Signature Value Alliance	Employee	\$950.99	\$950.99	\$0.00
	2-Party	\$1,901.98	\$1,220.80	\$681.18
	Family	\$2,472.57	\$1,220.80	\$1,251.77
United Healthcare Signature Value Harmony	Employee	\$857.14	\$857.14	\$0.00
	2-Party	\$1,714.28	\$1,220.80	\$493.48
	Family	\$2,228.56	\$1,220.80	\$1,007.76

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CalPERS 2026 BASIC MONTHLY PREMIUM RATES
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Rates based on Region 3*

Los Angeles, Riverside, and San Bernardino

Monthly Rates			Monthly Employer Contribution	Monthly Employee Contribution
Anthem Blue Cross Select HMO	Employee	\$962.68	\$962.68	\$0.00
	2-Party	\$1,925.36	\$1,220.80	\$704.56
	Family	\$2,502.97	\$1,220.80	\$1,282.17
Anthem Blue Cross Traditional HMO	Employee	\$1,128.53	\$1,128.53	\$0.00
	2-Party	\$2,257.06	\$1,220.80	\$1,036.26
	Family	\$2,934.18	\$1,220.80	\$1,713.38
Blue Shield Access+ HMO	Employee	\$917.91	\$917.91	\$0.00
	2-Party	\$1,835.82	\$1,220.80	\$615.02
	Family	\$2,386.57	\$1,220.80	\$1,165.77
Blue Shield Trio HMO *	Employee	\$852.56	\$852.56	\$0.00
	2-Party	\$1,705.12	\$1,220.80	\$484.32
	Family	\$2,216.66	\$1,220.80	\$995.86
Health Net Salud y Más	Employee	\$740.11	\$740.11	\$0.00
	2-Party	\$1,480.22	\$1,220.80	\$259.42
	Family	\$1,924.29	\$1,220.80	\$703.49
Kaiser Permanente	Employee	\$969.05	\$969.05	\$0.00
	2-Party	\$1,938.10	\$1,220.80	\$717.30
	Family	\$2,519.53	\$1,220.80	\$1,298.73
PERS Gold	Employee	\$960.03	\$960.03	\$0.00
	2-Party	\$1,920.06	\$1,220.80	\$699.26
	Family	\$2,496.08	\$1,220.80	\$1,275.28
PERS Platinum	Employee	\$1,431.81	\$1,220.80	\$211.01
	2-Party	\$2,863.62	\$1,220.80	\$1,642.82
	Family	\$3,722.71	\$1,220.80	\$2,501.91
United Healthcare Signature Value Alliance	Employee	\$870.76	\$870.76	\$0.00
	2-Party	\$1,741.52	\$1,220.80	\$520.72
	Family	\$2,263.98	\$1,220.80	\$1,043.18
United Healthcare Signature Value Harmony	Employee	\$765.51	\$765.51	\$0.00
	2-Party	\$1,531.02	\$1,220.80	\$310.22
	Family	\$1,990.33	\$1,220.80	\$769.53

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