

SAN MATEO-FOSTER CITY SCHOOL DISTRICT
DENTAL, VISION AND HEALTH INSURANCE MONTHLY RATES
2026 SUMMARY OF BENEFITS AND COVERAGE NOTICE
December payroll deductions reflect any changes effective January 1, 2026

CARRIER	PLAN CODE	SINGLE COVERAGE	PLAN CODE	DOUBLE COVERAGE	PLAN CODE	FAMILY COVERAGE
Delta Dental		\$ 61.46		\$ 124.91		\$ 186.37

Vision

VSP (Certificated & Classified)		\$ 6.88		\$ 14.64		\$ 20.66
VSP (Management)		\$ 6.02		\$ 13.78		\$ 19.80

Medical

Anthem Blue Cross Select HMO***	506	\$ 1,336.29	506	\$ 2,672.58	506	\$ 3,474.35
Anthem Blue Cross Traditional HMO	509	\$ 1,612.08	509	\$ 3,224.16	509	\$ 4,191.41
Blue Shield Access + HMO	525	\$ 1,301.95	525	\$ 2,603.90	525	\$ 3,385.07
Kaiser Permanente	533	\$ 1,168.86	533	\$ 2,337.72	533	\$ 3,039.04
PERS Gold** (PPO)	648	\$ 1,120.58	648	\$ 2,241.16	648	\$ 2,913.51
PERS Platinum (PPO)	657	\$ 1,670.14	657	\$ 3,340.28	657	\$ 4,342.36
United Healthcare Alliance HMO	576	\$ 1,290.06	576	\$ 2,580.12	576	\$ 3,354.16

****PERS Gold has a very limited physicians network**

*****Anthem HMO Select only available to San Francisco residents**

Choosing your health plan is an important decision. To assist you with this process, each health plan available through the California Public Employees' Retirement System has produced a Summary of Benefits and Coverage (SBC). In addition, the federal government has compiled a glossary of common health insurance terms. Together, these documents provide important information to help you better understand your health benefit coverage and more easily compare health plan options.

To view the SBCs and glossary online, visit **www.calpers.ca.gov** * under the **Plans and Rate** section (subsection **Health Plans**), or visit any of the health plan websites below. To request a free paper copy of the SBC and glossary, please contact each health plan directly.

* <https://www.calpers.ca.gov/page/active-members/health-benefits/plans-and-rates>

** To enroll in these health plans, you must belong to the specific employee association and pay applicable dues.

CARRIER INFORMATION	PHONE NUMBER	ACTIVE	RETIREE
Delta Dental Group number	1(866) 499-3001	https://www1.deltadentalins.com/	
		15997-0431	15997-0433
VSP Vision Service Plan	1(800) 877-7195	www.vsp.com	
VSP Certificated & Classified		30098994-1631	30098994-1633
VSP Management & Confidential		30098994-1612	30098994-1613
Medical Insurances - CalPERS	1(888) 225-7377	www.calpers.ca.gov	
Anthem Blue Cross (HMO)	1(855) 839-4524	www.anthem.com/ca/mcr/calpers	
Blue Shield Access + (HMO)	1(800)334-5847	www.blueshieldca.com/calpers	
Kaiser	1(800) 305-1220	www.kp.org/calpers	
PERS Platinum & PERS Gold (Blue Shield PPO)	1(855) 633-4436	www.blueshieldca.com/calpers	
UnitedHealthcare SignatureValue Alliance HMO	1(877) 359-3714	https://www.whyuhc.com/calpers	