2027 Monthly Reimbursement Rates for DMA and MDEA Retirees

Reimbursed up to the current Kaiser HMO Rate for each tier of coverage

REGION 1

2027	Kaiser HMO	Blue Shield Access HMO	Blue Shield Trio HMO*	Western Health Advantage HMO	Anthem Select HMO	Anthem Traditional HMO	United Healthcare Harmony HMO	United Healthcare Alliance HMO	PERS Platinum Blue Shield PPO	PERS Gold Blue Shield PPO
Retiree Only	1,020.63	1,312.12	1,035.57	N/A	1,319.44	1,565.52	N/A	N/A	1,611.62	1,048.17
Retiree + 1 Dependent	2,208.26	2,791.24	2,238.14	N/A	2,805.88	3,298.04	N/A	N/A	3,390.24	2,263.34
Combo Plan*	1,354.56	1,931.48	1,654.93	N/A	1,938.69	2,184.77	N/A	N/A	2,277.12	1,645.74

REGION 2

2027	Kaiser HMO	Blue Shield Access HMO	Blue Shield Trio HMO*	Western Health Advantage HMO	Anthem Select HMO	Anthem Traditional HMO	United Healthcare Harmony HMO	United Healthcare Alliance HMO	PERS Platinum Blue Shield PPO	PERS Gold Blue Cross PPO
Retiree Only	863.94	1,010.77	804.24	N/A	973.20	1,096.81	N/A	N/A	1,371.57	843.12
Retiree + 1 Dependent	1,894.88	2,188.54	1,775.48	N/A	2,113.40	2,360.62	N/A	N/A	2,910.14	1,853.24
Combo Plan*	1,197.87	1,630.13	1,423.60	N/A	1,628.45	1,716.06	N/A	N/A	2,037.07	1,440.69

REGION 3

2027	Kaiser HMO	Blue Shield Access HMO	Blue Shield Trio HMO	Western Health Advantage HMO	Anthem Select HMO	Anthem Traditional HMO	United Value Harmony HMO	United Healthcare Alliance HMO	PERS Platinum Blue Shield PPO	PERS Gold Blue Cross PPO
Retiree Only	844.28	808.19	741.01	N/A	892.06	1,072.02	N/A	N/A	1,382.00	847.50
Retiree + 1 Dependent	1,855.56	1,783.38	1,649.02	N/A	1,951.12	2311.04	N/A	N/A	2,931.00	1,862.00
Combo Plan*	1,178.21	1,427.55	1,360.37	N/A	1,511.31	1,691.27	N/A	N/A	2,047.50	1,445.07

OUT-OF-STATE

2027	Kaiser HMO	Blue Shield Access HMO	Blue Shield Trio HMO	Western Health Advantage HMO	Anthem Select HMO	Anthem Traditional HMO	United Healthcare Harmony HMO	United Healthcare Alliance HMO	PERS Platinum Blue Shield PPO	PERS Gold Blue Cross PPO
Retiree Only	1,335.12	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1,340.81	N/A
Retiree + 1 Dependent	2,837.24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2,848.62	N/A
Combo Plan*	1,582.12	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2,006.31	N/A

*The Combo Plan is applicable when the retiree is on full benefits (under age 65) and the dependent is on Medicare with a supplemental plan through CalPERS.