

# CalPERS 2022 Regional COBRA Health Premiums

**Effective Date: January 1, 2022**

Consolidated Omnibus Budget Reconciliation Act (COBRA) premiums are calculated at 102% of the Basic premiums, but some carriers may charge less than these maximum amounts.

## 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

## Basic Monthly COBRA Premiums

Plan	Single	2-Party	Family
<b>Anthem Blue Cross Del Norte</b>	\$1,078.15	\$2,156.30	\$2,803.19
<b>Anthem Blue Cross Select</b>	1,036.13	2,072.25	2,693.93
<b>Anthem Blue Cross Traditional</b>	1,330.08	2,660.16	3,458.21
<b>Blue Shield Access+</b>	1,138.33	2,276.66	2,959.66
<b>Blue Shield EPO</b>	1,138.33	2,276.66	2,959.66
<b>Blue Shield Trio</b>	916.51	1,833.02	2,382.92
<b>Health Net SmartCare</b>	1,176.06	2,352.12	3,057.76
<b>Kaiser</b>	874.20	1,748.40	2,272.93
<b>PERS Platinum</b>	1,078.15	2,156.30	2,803.19
<b>PERS Gold</b>	715.25	1,430.51	1,859.66
<b>PORAC</b>	814.98	1,759.50	2,263.38
<b>UnitedHealthcare SignatureValue Alliance</b>	1,040.69	2,081.37	2,705.78
<b>Western Health Advantage</b>	756.09	1,512.17	1,965.83

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<b>Region 2</b>			
Fresno, Imperial, Inyo, Kern, Kings, Madera, Orange, San Diego, San Luis Obispo, Santa Barbara, Tulare, Ventura			
<b>Basic Monthly COBRA Premiums</b>			
<b>Plan</b>	<b>Single</b>	<b>2-Party</b>	<b>Family</b>
<b>Anthem Blue Cross Select</b>	\$726.68	\$1,453.36	\$1,889.37
<b>Anthem Blue Cross Traditional</b>	1,027.27	2,054.55	2,670.91
<b>Blue Shield Access+</b>	918.22	1,836.45	2,387.38
<b>Blue Shield Trio</b>	757.55	1,515.11	1,969.64
<b>Health Net Salud y Más</b>	559.23	1,118.45	1,453.99
<b>Health Net SmartCare</b>	862.60	1,725.21	2,242.77
<b>Kaiser</b>	720.14	1,440.28	1,872.36
<b>PERS Platinum</b>	899.82	1,799.65	2,339.54
<b>PERS Gold</b>	599.54	1,199.07	1,558.79
<b>PORAC</b>	790.50	1,581.00	2,050.20
<b>Sharp</b>	713.19	1,426.39	1,854.31
<b>UnitedHealthcare SignatureValue Alliance</b>	790.59	1,581.18	2,055.53
<b>UnitedHealthcare SignatureValue Harmony</b>	798.39	1,596.79	2,075.82

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<b>Region 3</b>			
Los Angeles, Riverside, San Bernardino			
<b>Basic Monthly COBRA Premiums</b>			
<b>Plan</b>	<b>Single</b>	<b>2-Party</b>	<b>Family</b>
<b>Anthem Blue Cross Select</b>	\$690.01	\$1,380.02	\$1,794.03
<b>Anthem Blue Cross Traditional</b>	954.28	1,908.56	2,481.13
<b>Blue Shield Access+</b>	795.47	1,590.93	2,068.21
<b>Blue Shield Trio</b>	681.49	1,362.99	1,771.88
<b>Health Net Salud y Más</b>	473.15	946.29	1,230.18
<b>Health Net SmartCare</b>	780.26	1,560.52	2,028.68
<b>Kaiser</b>	734.18	1,468.35	1,908.86
<b>PERS Platinum</b>	880.64	1,761.27	2,289.66
<b>PERS Gold</b>	587.07	1,174.14	1,526.39
<b>PORAC</b>	790.50	1,504.50	1,931.88
<b>UnitedHealthcare SignatureValue Alliance</b>	787.29	1,574.57	2,046.95
<b>UnitedHealthcare SignatureValue Harmony</b>	728.57	1,457.13	1,894.27

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<b>Out of State Basic Monthly COBRA Premiums</b>			
<b>Plan</b>	<b>Single</b>	<b>2-Party</b>	<b>Family</b>
<b>Kaiser<sup>1</sup></b>	\$1,161.73	\$2,323.46	\$3,020.50
<b>PERS Platinum</b>	864.66	1,729.33	2,248.13
<b>PORAC</b>	916.98	1,936.98	2,267.46

<sup>1</sup>These premiums cover all Kaiser out-of-state areas.