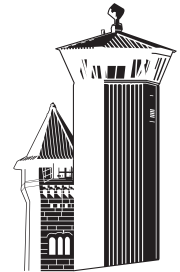


2017 Medical Rate Comparison



Rank & File

2017 Medical Rates with Employer Contribution Rate

Member Monthly Cost				
HMO and PPO Plans	Employee Only		Employee + 1	Family
CCPOA Medical Plan Member Contribution <i>*Must be a CCPOA Member</i>	SoCal	South Plan – #2661 8.26	South Plan – #2662 15.15	South Plan – #2663 75.60
	NorCal	North Plan – #2561 129.50	North Plan – #2562 257.69	North Plan – #2563 401.73
PERS Choice (PPO)		178.88	353.76	457.29
PERS Select (PPO)		111.25	218.50	281.45
PERS Care (PPO)		264.37	524.74	679.56
Blue Shield Access+		268.44	532.88	690.14
Anthem Select HMO		178.23	352.46	455.60
Kaiser		100.92	197.84	254.59

2017 State Contribution - Medical Plan*

Employee = \$562.00 | Employee + 1 = \$1128.00 | Family = \$1469.00

Dental

Western Dental and CCPOA Primary

\$21.00 monthly

*Actual rate = \$114.00 monthly,
\$69.06 State Contribution + Additional Negotiated Benefit/
Trust contribution of \$23.94

Vision

www.vsp.com

\$2.00 monthly*

*Actual rate = \$16.07 monthly,
\$8.64 State Contribution + Additional Negotiated Benefit/
Trust contribution of \$5.43

Use as example only. Your actual costs may vary.

*State contribution rate as of 08/24/16. Negotiations were not finalized as of print date and are subject to change after printing.

Retired

2017 Medical Rates with Employer Contribution Rate

Retired Members – Fully Vested Rates

Member Monthly Cost				
HMO and PPO Plans	Employee Only		Employee + 1	Family
CCPOA Medical Plan Member Contribution <i>*Must be a CCPOA Member</i>	SoCal	South Plan – #2661 0.00	South Plan – #2662 0.00	South Plan – #2663 0.00
	NorCal	North Plan – #2561 0.00	North Plan – #2562 36.69	North Plan – #2563 143.73
PERS Choice (PPO)		33.88	132.76	199.29
PERS Select (PPO)		0.00	0.00	23.45
PERS Care (PPO)		119.37	303.74	421.56
Blue Shield Access+		123.44	311.88	432.14
Anthem Select HMO		33.23	131.46	197.60
Kaiser		0.00	0.00	0.00

2017 State Contribution - Medical Plan*

Employee = \$707.00 | Employee + 1 = \$1349.00 | Family = \$1727.00

Dental

Retired Dental coverage is obtained through CalPERS

Vision

www.vsp.com

The Trust offers different levels of coverage through VSP. See the website for complete details.
STANDARD Plan Member + 1 Dependant = \$13.19 monthly

Use as example only. Your actual costs may vary.

* State contribution rate as of 08/24/16. Negotiations were not finalized as of print date and are subject to change after printing..

<http://eservices.dpa.ca.gov/BenefitsCalculatorExternal/Default.aspx>

<https://www.calpers.ca.gov/page/retirees/health-and-medicare/retiree-plans-and-rates>

<https://www.calpers.ca.gov/docs/2017-in-state-health-rates.pdf>

Retired/Medicare

2017 Retired Medicare Rates with Employer Contribution Rate

Member Monthly Cost				
HMO and PPO Plans	Employee Only		Employee + 1	Family
CCPOA Medical Plan Member Contribution <i>*Must be a CCPOA Member</i>	SoCal	South Plan – #2661 0.00	South Plan – #2662 0.00	South Plan – #2663 0.00
	NorCal	North Plan – #2561 0.00	North Plan – #2562 0.00	North Plan – #2563 0.00
PERS Choice (PPO)		0.00	0.00	0.00
PERS Select (PPO)		0.00	0.00	0.00
PERS Care (PPO)		0.00	0.00	0.00
Kaiser		0.00	0.00	0.00

When you or your dependent reach age 65

or obtain Medicare, these are your rates.

Does your family use both Basic and a Medicare Supplement?

See next chart for more cost comparisons.

2017 State Contribution - Medical Plan*

Employee = \$707.00 | Employee + 1 = \$1349.00 | Family = \$1727.00

Use as example only. Your actual costs may vary.

* State contribution rate as of 08/24/16. Negotiations were not finalized as of print date and are subject to change after printing..

<http://eservices.dpa.ca.gov/BenefitsCalculatorExternal/Default.aspx>

<https://www.calpers.ca.gov/page/retirees/health-and-medicare/retiree-plans-and-rates>

<https://www.calpers.ca.gov/docs/2017-in-state-health-rates.pdf>

Retired/Medicare

2017 Retired Rates Combination Plans with State Contribution

Combination Monthly Rate Employee in Supplemental Medicare & Dependant in Basic	Employee in M 1 Dependent in B		Employee in M 2+ Dependents in B	Employee & 1 Dependent in M 1+ Dependents in B
CCPOA Medical Plan Member Contribution <i>*Must be a CCPOA Retired Member</i>	SoCal	\$0.00	\$0.00	\$0.00
	NorCal	0.00	0.00	0.00

Combination Monthly Rate Employee in Supplemental Medicare & Dependant in Basic	Employee in B 1 Dependent in M		Employee in B 2+ Dependents in M	Employee & 1 Dependent in B 1+ Dependents in M
CCPOA Medical Plan Member Contribution <i>*Must be a CCPOA Retired Member</i>	SoCal	\$0.00	\$0.00	\$0.00
	NorCal	0.00	0.00	0.00

2017 State Contribution - Medical Plan *

Employee = \$707.00 | Employee + 1 = \$1349.00 | Family = \$1727.00

Use as example only. Your actual costs may vary.

* State contribution rate as of 08/24/16.
Negotiations were not finalized as of print date and are subject to change after printing..

<http://eservices.dpa.ca.gov/BenefitsCalculatorExternal/Default.aspx>
<https://www.calpers.ca.gov/page/retirees/health-and-medicare/retiree-plans-and-rates>
<https://www.calpers.ca.gov/docs/2017-in-state-health-rates.pdf>

Supervisor

2017 Co-Ben Rates

Member Monthly Cost				
HMO and PPO Plans	Employee Only		Employee + 1	Family
CCPOA Medical Plan Member Contribution <i>*Must be a CCPOA Member</i>	SoCal	South Plan – #2661 570.26	South Plan – #2662 1143.15	South Plan – #2663 1544.60
	NorCal	North Plan – #2561 691.50	North Plan – #2562 1385.69	North Plan – #2563 1870.73
PERS Choice (PPO)		740.88	1481.76	1926.29
PERS Select (PPO)		673.25	1346.50	1750.45
PERS Care (PPO)		826.37	1652.74	2148.56
Blue Shield Access+		830.44	1660.88	2159.14
Kaiser		662.92	1325.84	1723.59

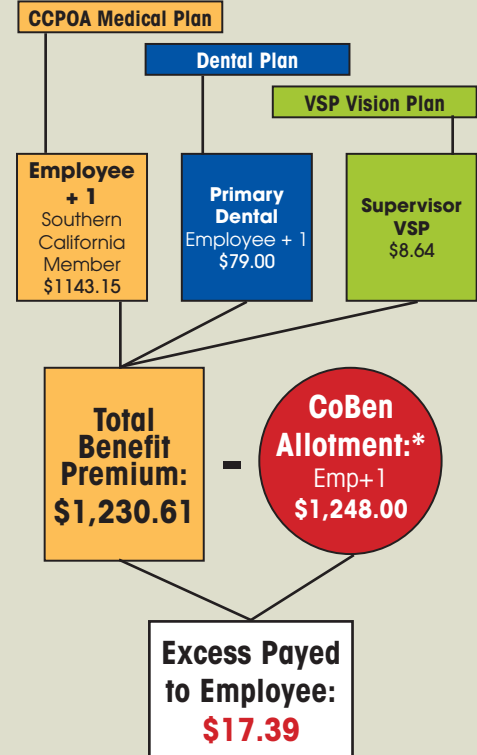
2017 Co-Ben Allotment*

Employee = \$644.00 | Employee + 1 = \$1248.00 | Family = \$1620.00

Use as example only. Your actual costs may vary.

* The CoBen allowance for Excluded employees is determined by CalHR. Check [calhr.ca.gov](http://www.calhr.ca.gov) to see if updated rates are available. As of September 1, 2016, the published CoBen allowances for all Excluded employees are shown. <http://www.calhr.ca.gov/employees/Pages/consolidated-benefits.aspx>

Here's an Example of CoBen* in action:



Dental Rates

2017 Member Contribution

	Rank & File	Supervisor	Retired
Primary Dental			
Employee Only	21.00 monthly	37.00	Retired Dental coverage is obtained through CalPERS
Employee + 1	Actual rate = \$114.00 monthly. \$69.06 State Contribution + Additional Negotiated Benefit/Trust contribution of \$23.94	79.00	
Family		135.00	
Western Dental			
Employee Only	21.00 monthly	15.16	Retired Dental coverage is obtained through CalPERS
Employee + 1	Actual rate = \$114.00 monthly. \$69.06 State Contribution + Additional Negotiated Benefit/Trust contribution of \$23.94	25.02	
Family		35.49	

2017 Co-Ben Allotment*

Employee = \$644.00 | Employee + 1 = \$1248.00 | Family = \$1620.00

Use as example only. Your actual costs may vary.

* The CoBen allowance for Excluded employees is determined by CalHR. Check calhr.ca.gov to see if updated rates are available. As of September 1, 2016, the published CoBen allowances for all Excluded employees are shown. <http://www.calhr.ca.gov/employees/Pages/consolidated-benefits.aspx>

Vision Plan

2017 VSP Plan Details

PLAN	MEMBER COST	ADDITIONAL INFO	
VSP Active Rate	\$2.00 monthly	State = \$8.64 Supplemental/ Trust = \$5.43 Total Plan = \$16.07	
VSP CoBen	\$8.64 monthly	State Basic Plan. CCPOA Supervisors get enhanced 2nd pair coverage at no cost	
VSP RETIREE RATES			
Standard Plan	Single = \$9.20	Two Party = \$13.19	Family = \$23.54
Exam Plus	Single = \$1.98	Two Party = \$2.72	Family = \$4.65

Co-Pays (*Exam Plus not included*):
Exam = \$10 / Basic Glasses = \$25
Contacts = \$0
Lens Enhancements = Co-Pay vary by plan

Supervisor VSP is more robust than State Enhanced – and costs less!

- Costco is an Open Access provider. They have direct billing to VSP and a special benefit schedule.
- Shatter-proof lenses (polycarbonate) for children are now covered.

Use as example only. Your actual costs may vary.

* State contribution rate as of 08/24/16. Negotiations were not finalized as of print date and are subject to change after printing..

