

CALIFORNIA STATE UNIVERSITY, FRESNO ASSOCIATION, INC.

2025 Medical Insurance Plans and Cost

Effective January 1, 2025 through December 31, 2025

<u>Health Plans</u>	2025 Monthly Premium	Employer Contribution	Employee Contribution (Monthly)	Employee Contribution (Per Paycheck)
<i>Anthem HMO Select</i>				
Employee	\$919.00	\$730.00	\$189.00	\$94.50
Employee + 1	\$1,838.00	\$1,390.00	\$448.00	\$224.00
Employee + 2 or more	\$2,389.40	\$1,786.00	\$603.40	\$301.70
<i>Anthem HMO Traditional</i>				
Employee	\$1,110.97	\$730.00	\$380.97	\$190.49
Employee + 1	\$2,221.94	\$1,390.00	\$831.94	\$415.97
Employee + 2 or more	\$2,888.52	\$1,786.00	\$1,102.52	\$551.26
<i>Blue Shield Access + HMO</i>				
Employee	\$948.53	\$730.00	\$218.53	\$109.27
Employee + 1	\$1,897.06	\$1,390.00	\$507.06	\$253.53
Employee + 2 or more	\$2,466.18	\$1,786.00	\$680.18	\$340.09
<i>KAISER PERMANENTE</i>				
Employee	\$944.34	\$730.00	\$214.34	\$107.17
Employee + 1	\$1,888.68	\$1,390.00	\$498.68	\$249.34
Employee + 2 or more	\$2,455.28	\$1,786.00	\$669.28	\$334.64
<i>UNITEDHEALTHCARE ALLIANCE HMO</i>				
Employee	\$890.66	\$730.00	\$160.66	\$80.33
Employee + 1	\$1,781.32	\$1,390.00	\$391.32	\$195.66
Employee + 2 or more	\$2,315.72	\$1,786.00	\$529.72	\$264.86
<i>PERS-Platinum</i>				
Employee	\$1,258.76	\$730.00	\$528.76	\$264.38
Employee + 1	\$2,517.52	\$1,390.00	\$1,127.52	\$563.76
Employee + 2 or more	\$3,272.78	\$1,786.00	\$1,486.78	\$743.39
<i>PERS-Gold</i>				
Employee	\$864.75	\$730.00	\$134.75	\$67.38
Employee + 1	\$1,729.50	\$1,390.00	\$339.50	\$169.75
Employee + 2 or more	\$2,248.35	\$1,786.00	\$462.35	\$231.18
(1) For HMO plans, must select a doctor for each family member at the time of enrollment.				
TO MAKE ANY CHANGES, PLEASE CALL AUXILIARY HUMAN RESOURCES AT EXT. 80865.				

CALIFORNIA STATE UNIVERSITY, FRESNO ASSOCIATION, INC.

2025 Miscellaneous Insurance Plans and Costs

Effective January 1, 2025 through December 31, 2025

		Total Premium	Employer Contribution	Employee Contribution	Employee Contribution Per Paycheck
<u>Dental Plan</u>					
PREMIER ACCESS					
Employee		\$25.00	\$25.00	\$0.00	\$0.00
Employee + 1		\$75.00	\$50.00	\$25.00	\$12.50
Employee + 2 or more		\$90.00	\$50.00	\$40.00	\$20.00
<u>Vision Plan</u>					
VSP					
Employee		\$9.90	\$9.90	\$0.00	\$0.00
Employee + 1		\$13.90	\$9.90	\$4.00	\$2.00
Employee + 2 or more		\$24.10	\$9.90	\$14.20	\$7.10
<u>Life Insurance Plan</u>					
SUN LIFE INSURANCE					
Under the Life Insurance Plan structure, the following benefits are provided					
at no cost to the employee:					
		Reg./Professional/Sup/Confidential - \$25,000 in coverage.			
		Manager Classification - \$50,000 in coverage.			

TO MAKE ANY CHANGES, PLEASE CALL HUMAN RESOURCES AT EXT. 80865.