

**CALIFORNIA STATE UNIVERSITY, FRESNO ATHLETIC CORPORATION**

2025 Medical Insurance Plans and Cost

Effective January 1, 2025 through December 31, 2025

<u>Health Plans</u>	<b>2025 Monthly Premium</b>	<b>Employer Contribution</b>	<b>Employee Contribution (Monthly)</b>	<b>Employee Contribution (Per Paycheck)</b>
<b><i>Anthem HMO Select</i></b>				
Employee	\$919.00	\$990.00	\$0.00	\$0.00
Employee + 1	\$1,838.00	\$990.00	\$848.00	\$424.00
Employee + 2 or more	\$2,389.40	\$990.00	\$1,399.40	\$699.70
<b><i>Anthem HMO Traditional</i></b>				
Employee	\$1,110.97	\$990.00	\$120.97	\$60.49
Employee + 1	\$2,221.94	\$990.00	\$1,231.94	\$615.97
Employee + 2 or more	\$2,888.52	\$990.00	\$1,898.52	\$949.26
<b><i>Blue Shield Access+ HMO</i></b>				
Employee	\$948.53	\$990.00	\$0.00	\$0.00
Employee + 1	\$1,897.06	\$990.00	\$907.06	\$453.53
Employee + 2 or more	\$2,466.18	\$990.00	\$1,476.18	\$738.09
<b><i>KAISER PERMANENTE</i></b>				
Employee	\$944.34	\$990.00	\$0.00	\$0.00
Employee + 1	\$1,888.68	\$990.00	\$898.68	\$449.34
Employee + 2 or more	\$2,455.28	\$990.00	\$1,465.28	\$732.64
<b><i>UNITEDHEALTHCARE ALLIANCE HMO</i></b>				
Employee	\$890.66	\$990.00	\$0.00	\$0.00
Employee + 1	\$1,781.32	\$990.00	\$791.32	\$395.66
Employee + 2 or more	\$2,315.72	\$990.00	\$1,325.72	\$662.86
<b><i>PERS-Platinum</i></b>				
Employee	\$1,258.76	\$990.00	\$268.76	\$134.38
Employee + 1	\$2,517.52	\$990.00	\$1,527.52	\$763.76
Employee + 2 or more	\$3,272.78	\$990.00	\$2,282.78	\$1,141.39
<b><i>PERS-Gold</i></b>				
Employee	\$864.75	\$990.00	\$0.00	\$0.00
Employee + 1	\$1,729.50	\$990.00	\$739.50	\$369.75
Employee + 2 or more	\$2,248.35	\$990.00	\$1,258.35	\$629.18

(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.**