

CALIFORNIA STATE UNIVERSITY, FRESNO ATHLETIC CORPORATION				
2026 Medical Insurance Plans and Cost				
Effective January 1, 2026 through December 31, 2026				
<u>Health Plans</u>	2026 Monthly Premium	Employer Contribution	Employee Contribution (Monthly)	Employee Contribution (Per Paycheck)
Anthem HMO Select				
Employee	\$1,016.32	\$990.00	\$26.32	\$13.16
Employee + 1	\$2,032.64	\$990.00	\$1,042.64	\$521.32
Employee + 2 or more	\$2,642.43	\$990.00	\$1,652.43	\$826.22
Anthem HMO Traditional				
Employee	\$1,158.26	\$990.00	\$168.26	\$84.13
Employee + 1	\$2,316.52	\$990.00	\$1,326.52	\$663.26
Employee + 2 or more	\$3,011.48	\$990.00	\$2,021.48	\$1,010.74
Blue Shield Access+ HMO				
Employee	\$1,052.89	\$990.00	\$62.89	\$31.45
Employee + 1	\$2,105.78	\$990.00	\$1,115.78	\$557.89
Employee + 2 or more	\$2,737.51	\$990.00	\$1,747.51	\$873.76
KAISER PERMANENTE				
Employee	\$987.69	\$990.00	\$0.00	\$0.00
Employee + 1	\$1,975.38	\$990.00	\$985.38	\$492.69
Employee + 2 or more	\$2,567.99	\$990.00	\$1,577.99	\$789.00
UNITEDHEALTHCARE ALLIANCE HMO				
Employee	\$950.99	\$990.00	\$0.00	\$0.00
Employee + 1	\$1,901.98	\$990.00	\$911.98	\$455.99
Employee + 2 or more	\$2,472.57	\$990.00	\$1,482.57	\$741.29
PERS-Platinum				
Employee	\$1,426.24	\$990.00	\$436.24	\$218.12
Employee + 1	\$2,852.48	\$990.00	\$1,862.48	\$931.24
Employee + 2 or more	\$3,708.22	\$990.00	\$2,718.22	\$1,359.11
PERS-Gold				
Employee	\$956.28	\$990.00	\$0.00	\$0.00
Employee + 1	\$1,912.56	\$990.00	\$922.56	\$461.28
Employee + 2 or more	\$2,486.33	\$990.00	\$1,496.33	\$748.17
(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.				