CALIFORNIA STATE UNIVERSITY, FRESNO FOUNDATION

Health Insurance Plans and Costs (Option C) Effective July 1, 2025 through June 30, 2026

	Total Premium	Employer Contribution	Employee Pays Monthly	Deduction Each Paycheck
Medical Plans				
Employee Only	\$843.18	\$843.18	\$0.00	\$0.00
Employee + 1	\$1,964.62	\$843.18	\$1,121.44	\$560.72
Employee + 2 or more	\$2,698.01	\$843.18	\$1,854.83	\$927.42
Blue Shield PPO				
Employee Only	\$924.74	\$924.74	\$0.00	\$0.00
Employee + 1	\$2,154.75	\$924.74	\$1,230.01	\$615.01
Employee + 2 or more	\$2,959.28	\$924.74	\$2,034.54	\$1,017.27
KAISER				
Employee Only	\$794.22	\$794.22	\$0.00	\$0.00
Employee + 1	\$1,850.53	\$794.22	\$1,056.31	\$528.16
Employee + 2 or more	\$2,541.50	\$794.22	\$1,747.28	\$873.64
Dental Plan				
PREMIER ACCESS				
Employee Only	\$43.17	\$43.17	\$0.00	\$0.00
Employee + Spouse	\$92.83	\$43.17	\$49.66	\$24.83
Employee + Children	\$94.52	\$43.17	\$51.35	\$25.68
Employee + Family	\$144.32	\$43.17	\$101.15	\$50.58
VSP				,
Employee Only	\$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