City of San José
Office of Retirement Services

2017 Member + Child(ren)
Monthly Retiree Rates
Non-Medicare and Medicare Plans

Lowest Cost Plan Available to Active Employees:			Kaiser DHMO MB + CH: 857.86				Amount Available for P&F Members Medicare Part B Rmbrsmt.*
Provider/Plan	**Group #**	**Coverage Type**	Plan Codes for MB+CH	**Retiree Pays**	Fund Pays	Total Monthly Premium	
Kaiser Permanente Plans (*Available in California only*)							
Deductible HMO (DHMO) Plan	887 (NCal) 230179 (SCal)	MB(NSA) +CH(NSA)	KCHDHMO	**0.00**	857.86	857.86	
KPSA Plan		MB(SA) + CH(SA)	A2DHMO	**0.00**	578.24	578.24	**279.62** ←
Split KPSA/DHMO Plan		MB(SA) + CH(NSA)	A1-bDHMO	**0.00**	656.78	656.78	**201.08** ←
$25 HMO Plan		MB(NSA) + CH(NSA)	KCH	**189.76**	857.86	1,047.62	
KPSA Plan		MB(SA) + CH(SA)	A2	**0.00**	578.24	578.24	**279.62** ←
Split KPSA/$25 HMO Plan		MB(SA) + CH(NSA)	A1-b	**0.00**	738.08	738.08	**119.78** ←
****NEW** Sutter Health Plus HMO Plans** (*Available in California only*)							
Deductible HMO Plan	777000	MB + CH (DHMO)	CCHDHMO	**40.98**	857.86	898.84	
$25 HMO Plan		MB + CH (25HMO)	CCH	**239.80**	857.86	1,097.66	
Blue Shield of California HMO Plan (*Available in California only*)							
Medicare HMO Plan	W0051445	MB(MHMO) + CH(MHMO)	YF2CH	**339.78**	857.86	1,197.64	
Blue Shield and Sutter Split Plans (*Available in California only*)							
Split Med HMO/Sutter DHMO Plan		MB(BSC) + CH(SDHMO)	**See BSC/SHP Rate Sheet on Page 5**				
Split Med HMO/Sutter HMO Plan		MB(BSC) + CH(SHMO)	**See BSC/SHP Rate Sheet on Page 5**				
Blue Shield PPO Plans (*Available Nationwide*)							
$25 PPO Plan (Nationwide)	W0051445	MB + CH (25PPO)	BCH	**898.74**	857.86	1,756.60	
Medicare PPO Plan		MB(MPPO) + CH(MPPO)	ZF2CH	**160.56**	857.86	1,018.42	
Split Med PPO/$25 PPO Plan		MB(MPPO) + CH(25PPO)	ZHPPO	**404.19**	857.86	1,262.05	

Coverage Abbreviations:

MB = Member
SP = Spouse
DP = Domestic Partner
CH = Child(ren)
SA = Kaiser Permanente Sr. Advantage (KPSA)
NSA = Non-Sr. Advantage (Traditional Plan)
M = Medicare

*Police & Fire Retirees are eligible to receive a credit for their monthly Medicare Part B premium when their current plan premiums cost the Fund less than the maximum monthly contribution. The Member is eligible to receive reimbursement based on the difference between the maximum contribution amount and the actual monthly premium.