



# 2027 Medical Premiums: Retiree or Survivor *without* Medicare (California)

Retirees hired BEFORE January 9, 2009 or with *at least* 20 years of service or more

| Medical Premiums (Monthly)                                                  | Kaiser Permanente HMO                                               |            | Blue Shield of California                                                   |            |             |            |            |            | Health Net CanopyCare HMO* |            |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------|------------|-----------------------------------------------------------------------------|------------|-------------|------------|------------|------------|----------------------------|------------|
|                                                                             |                                                                     |            | Trio HMO                                                                    |            | Access+ HMO |            | PPO        |            |                            |            |
|                                                                             | You Pay                                                             | City Pays  | You Pay                                                                     | City Pays  | You Pay     | City Pays  | You Pay    | City Pays  | You Pay                    | City Pays  |
| Retiree/Survivor Only                                                       | \$4.74                                                              | \$2,083.18 | \$83.39                                                                     | \$2,678.23 | \$228.94    | \$3,207.76 | \$400.30   | \$2,063.83 | \$0.00                     | \$2,153.64 |
| Retiree/Survivor +1 Dep w/out Medicare                                      | \$521.37                                                            | \$2,599.81 | \$702.43                                                                    | \$3,297.26 | \$999.36    | \$3,978.18 | \$954.82   | \$2,618.34 | \$482.70                   | \$2,636.34 |
| Retiree/Survivor +2 or More Deps w/out Med.                                 | \$1,378.96                                                          | \$2,599.81 | \$1,690.57                                                                  | \$3,297.26 | \$2,229.13  | \$3,978.18 | \$1,840.20 | \$2,618.34 | \$1,253.28                 | \$2,636.34 |
| Retiree/Survivor +1 Dep w/Medicare Parts A&B                                | Medicare Dependents will be enrolled in Kaiser Senior Advantage HMO |            | Medicare Dependents will be enrolled in Blue Shield of CA Medicare MAPD-PPO |            |             |            |            |            | N/A                        | N/A        |
|                                                                             | \$194.31                                                            | \$2,272.76 | \$382.83                                                                    | \$2,977.67 | \$528.38    | \$3,507.20 | \$699.74   | \$2,363.27 |                            |            |
| Retiree/Survivor +1 Dep w/Medicare Parts A&B +1 or more non-Medicare Dep(s) | \$1,051.90                                                          | \$2,272.76 | \$1,370.97                                                                  | \$2,977.67 | \$1,758.15  | \$3,507.20 | \$1,585.12 | \$2,363.27 | N/A                        | N/A        |

Retirees hired AFTER January 9, 2009 with *at least* 15 years and *less than* 20 years of service

| Medical Premiums (Monthly)                                                  | Kaiser Permanente HMO                                               |            | Blue Shield of California                                                   |            |             |            |            |            | Health Net CanopyCare HMO* |            |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------|------------|-----------------------------------------------------------------------------|------------|-------------|------------|------------|------------|----------------------------|------------|
|                                                                             |                                                                     |            | Trio HMO                                                                    |            | Access+ HMO |            | PPO        |            |                            |            |
|                                                                             | You Pay                                                             | City Pays  | You Pay                                                                     | City Pays  | You Pay     | City Pays  | You Pay    | City Pays  | You Pay                    | City Pays  |
| Retiree/Survivor Only                                                       | \$525.53                                                            | \$1,562.39 | \$752.95                                                                    | \$2,008.67 | \$1,030.88  | \$2,405.82 | \$916.26   | \$1,547.87 | \$538.41                   | \$1,615.23 |
| Retiree/Survivor +1 Dep w/out Medicare                                      | \$1,171.32                                                          | \$1,949.86 | \$1,526.74                                                                  | \$2,472.95 | \$1,993.90  | \$2,983.64 | \$1,609.40 | \$1,963.76 | \$1,141.78                 | \$1,977.26 |
| Retiree/Survivor +2 or More Deps w/out Med.                                 | \$2,028.91                                                          | \$1,949.86 | \$2,514.88                                                                  | \$2,472.95 | \$3,223.67  | \$2,983.64 | \$2,494.78 | \$1,963.76 | \$1,912.36                 | \$1,977.26 |
| Retiree/Survivor +1 Dep w/Medicare Parts A&B                                | Medicare Dependents will be enrolled in Kaiser Senior Advantage HMO |            | Medicare Dependents will be enrolled in Blue Shield of CA Medicare MAPD-PPO |            |             |            |            |            | N/A                        | N/A        |
|                                                                             | \$762.50                                                            | \$1,704.57 | \$1,127.25                                                                  | \$2,233.25 | \$1,405.18  | \$2,630.40 | \$1,290.56 | \$1,772.45 |                            |            |
| Retiree/Survivor +1 Dep w/Medicare Parts A&B +1 or more non-Medicare Dep(s) | \$1,620.09                                                          | \$1,704.57 | \$2,115.39                                                                  | \$2,233.25 | \$2,634.95  | \$2,630.40 | \$2,175.94 | \$1,772.45 | N/A                        | N/A        |

Required premium contributions for Retirees or Survivors, if any, will be deducted from the member's monthly pension check.

If the pension check does not fully cover the premium amount, payment instructions are available at <https://sfhss.org/how-make-payment>.



# 2027 Medical Premiums: Retiree or Survivor *without* Medicare (California)

Retirees hired AFTER January 9, 2009<sup>1</sup> with *at least* 10 years but *less than* 15 years of service

| Medical Premiums (Monthly)                                                  | Kaiser Permanente HMO                                               |            | Blue Shield of California                                                   |            |             |            |            |            | Health Net CanopyCare HMO* |            |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------|------------|-----------------------------------------------------------------------------|------------|-------------|------------|------------|------------|----------------------------|------------|
|                                                                             |                                                                     |            | Trio HMO                                                                    |            | Access+ HMO |            | PPO        |            |                            |            |
|                                                                             | You Pay                                                             | City Pays  | You Pay                                                                     | City Pays  | You Pay     | City Pays  | You Pay    | City Pays  | You Pay                    | City Pays  |
| Retiree/Survivor Only                                                       | \$1,046.33                                                          | \$1,041.59 | \$1,422.50                                                                  | \$1,339.12 | \$1,832.82  | \$1,603.88 | \$1,432.21 | \$1,031.92 | \$1,076.82                 | \$1,076.82 |
| Retiree/Survivor +1 Dep w/out Medicare                                      | \$1,821.27                                                          | \$1,299.91 | \$2,351.06                                                                  | \$1,648.63 | \$2,988.45  | \$1,989.09 | \$2,263.99 | \$1,309.17 | \$1,800.87                 | \$1,318.17 |
| Retiree/Survivor +2 or More Deps w/out Med.                                 | \$2,678.86                                                          | \$1,299.91 | \$3,339.20                                                                  | \$1,648.63 | \$4,218.22  | \$1,989.09 | \$3,149.37 | \$1,309.17 | \$2,571.45                 | \$1,318.17 |
| Retiree/Survivor +1 Dep w/Medicare Parts A&B                                | Medicare Dependents will be enrolled in Kaiser Senior Advantage HMO |            | Medicare Dependents will be enrolled in Blue Shield of CA Medicare MAPD-PPO |            |             |            |            |            | N/A                        | N/A        |
|                                                                             | \$1,330.69                                                          | \$1,136.38 | \$1,871.66                                                                  | \$1,488.84 | \$2,281.98  | \$1,753.60 | \$1,881.37 | \$1,181.64 |                            |            |
| Retiree/Survivor +1 Dep w/Medicare Parts A&B +1 or more non-Medicare Dep(s) | \$2,188.28                                                          | \$1,136.38 | \$2,859.80                                                                  | \$1,488.84 | \$3,511.75  | \$1,753.60 | \$2,766.75 | \$1,181.64 | N/A                        | N/A        |

Retirees hired AFTER January 9, 2009<sup>1</sup> with *at least* 5 years and *less than* 10 years of service

| Medical Premiums (Monthly)                                                  | Kaiser Permanente HMO                                               |           | Blue Shield of California                                                   |           |             |           |            |           | Health Net CanopyCare HMO* |           |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------|-----------|-----------------------------------------------------------------------------|-----------|-------------|-----------|------------|-----------|----------------------------|-----------|
|                                                                             |                                                                     |           | Trio HMO                                                                    |           | Access+ HMO |           | PPO        |           |                            |           |
|                                                                             | You Pay                                                             | City Pays | You Pay                                                                     | City Pays | You Pay     | City Pays | You Pay    | City Pays | You Pay                    | City Pays |
| Retiree/Survivor Only                                                       | \$2,087.92                                                          | \$0.00    | \$2,761.62                                                                  | \$0.00    | \$3,436.70  | \$0.00    | \$2,464.13 | \$0.00    | \$2,153.64                 | \$0.00    |
| Retiree/Survivor +1 Dep w/out Medicare                                      | \$3,121.18                                                          | \$0.00    | \$3,999.69                                                                  | \$0.00    | \$4,977.54  | \$0.00    | \$3,573.16 | \$0.00    | \$3,119.04                 | \$0.00    |
| Retiree/Survivor +2 or More Deps w/out Med.                                 | \$3,978.77                                                          | \$0.00    | \$4,987.83                                                                  | \$0.00    | \$6,207.31  | \$0.00    | \$4,458.54 | \$0.00    | \$3,889.62                 | \$0.00    |
| Retiree/Survivor +1 Dep w/Medicare Parts A&B                                | Medicare Dependents will be enrolled in Kaiser Senior Advantage HMO |           | Medicare Dependents will be enrolled in Blue Shield of CA Medicare MAPD-PPO |           |             |           |            |           | N/A                        | N/A       |
|                                                                             | \$2,467.07                                                          | \$0.00    | \$3,360.50                                                                  | \$0.00    | \$4,035.58  | \$0.00    | \$3,063.01 | \$0.00    |                            |           |
| Retiree/Survivor +1 Dep w/Medicare Parts A&B +1 or more non-Medicare Dep(s) | \$3,324.66                                                          | \$0.00    | \$4,348.64                                                                  | \$0.00    | \$5,265.35  | \$0.00    | \$3,948.39 | \$0.00    | N/A                        | N/A       |

<sup>1</sup>Retirees or survivors of retirees with at least 5 years of service but less than 10 years of service have no City contribution and must pay the full premium rate.