

City of San José
Office of Retirement Services
2024 Member + Spouse Monthly Retiree Rates

Lowest Cost Plan Available to Active Employees: \$3,200 Kaiser High Deductible HMO						MB + SP/DP:	\$ 1,193.68	Police & Fire Members Only Medicare Part B Rmbrsmt. **
Providers & Plans	Coverage Type	Plan Codes for MB+SP/DP	Retiree Pays	Fund Pays	Total Monthly Premium			
Kaiser Permanente Plans (California Only)								
1	\$3,200 High Deductible HMO *	MB + SP/DP	KHDHP	0.00	1,193.68	1,193.68		
2	Medicare Split: Sr. Advantage/\$3,200 High Deductible HMO*	MB(M) + SP/DP	A1HDHP	0.00	1,193.68	866.93	326.75	
3		MB + SP/DP(M)	A1-aHDHP	0.00	1,193.68	866.93	326.75	
4	\$1,500 Deductible HMO	MB + SP/DP	KDHMO	223.06	1,193.68	1,416.74		
5	Medicare Split: Sr. Advantage & \$1,500 Deductible HMO	MB(M) + SP/DP	A1DHMO	0.00	1,193.68	978.45	215.23	
6		MB + SP/DP(M)	A1-aDHMO	0.00	1,193.68	978.47	215.21	
7	\$25 Copay HMO	MB + SP/DP	K	536.54	1,193.68	1,730.22		
8	Medicare Split: Sr. Advantage & \$25 Copay HMO	MB(M) + SP/DP	A1	0.00	1,193.68	1,135.19	58.49	
9		MB + SP/DP(M)	A1-a	0.00	1,193.68	1,135.21	58.47	
10	Medicare Sr. Advantage \$25 Copay HMO plan	MB(M) + SP/DP(M)	A2	0.00	1,193.68	540.18	653.50	
Anthem HMO Plans (California Only)								
11	\$20 Copay Traditional HMO	MB + SP/DP	ZMSP	1,184.22	1,193.68	2,377.90		
12	\$20 Copay Select HMO	MB + SP/DP	IMSP	874.80	1,193.68	2,068.48		
13	\$1,500 Deductible Select HMO	MB + SP/DP	JMSP	401.10	1,193.68	1,594.78		
14	Medicare Split: Medicare Advantage PPO & \$20 Copay Traditional HMO	MB (M) + SP/DP	Z18MSP	497.97	1,193.68	1,691.65		
15		MB + SP/DP (M)	Z19MSP	389.89	1,193.68	1,583.57		
16	Medicare Split: Medicare Advantage PPO & \$20 Copay Select HMO	MB(M) + SP/DP	L1MSP	343.25	1,193.68	1,536.93		
17		MB + SP/DP(M)	M1MSP	249.25	1,193.68	1,442.93		
18	Medicare Split: Medicare Advantage PPO & \$1500 Deductible Select HMO	MB(M) + SP/DP	N1MSP	106.37	1,193.68	1,300.05		
19		MB + SP/DP(M)	O1MSP	33.89	1,193.68	1,227.57		
Anthem PPO Plans (Nationwide)								
20	\$2,500 High Deductible Classic PPO*	MB + SP/DP	PMSP	2,444.50	1,193.68	3,638.18		
21	\$100 Deductible Select PPO	MB + SP/DP	QMSP	4,712.06	1,193.68	5,905.74		
22	\$100 Deductible Classic PPO	MB + SP/DP	RMSP	5,122.68	1,193.68	6,316.36		
23	Medicare Advantage PPO	MB(M) + SP/DP(M)	SMSP	0.00	1,193.68	1,005.38	188.30	
24	Medicare Split: Medicare Advantage PPO & \$100 Deductible Select PPO	MB(M) + SP/DP	TMSP	2,261.87	1,193.68	3,455.55		
25		MB + SP/DP(M)	UMSP	1,993.41	1,193.68	3,187.09		
26	Medicare Split: Medicare Advantage PPO & \$100 Deductible Classic PPO	MB(M) + SP/DP	VMSP	2,467.17	1,193.68	3,660.85		
27		MB + SP/DP(M)	WMSP	2,180.07	1,193.68	3,373.75		
28	Medicare Split: Medicare Advantage PPO & \$2,500 High Deductible Classic PPO*	MB(M) + SP/DP	XMSP	1,128.11	1,193.68	2,321.79		
29		MB + SP/DP(M)	YMSP	962.73	1,193.68	2,156.41		
In-Lieu Credit Program								
Medical In-Lieu (In Lieu credits have no cash value)		MB + SP/DP	MSIL	298.42				
Dental In-Lieu (In Lieu credits have no cash value)		MB + SP/DP	DMSIL	12.17				
Coverage Abbreviations: (M) = Medicare MB = Member or Survivor SP = Spouse DP = Domestic Partner CH = Child(ren) * Health Savings Account (H.S.A.) Compatible			**Police & Fire Retirees are eligible to receive Medicare Part B reimbursement if enrolled in a medicare plan where the Total Monthly Premium amount is lower than the Lowest Cost Plan subsidy amount.					