

Bonita Unified School District

2026 RETIREE BENEFIT RATES

The District will contribute \$162.00 towards the cost of insurance. Rates below already reflect this contribution.

Medical Plans	Single	2-Party	Family
<i>Anthem HMO Select</i>	\$800.68	\$1,763.36	\$2,340.97
<i>Anthem Traditional HMO</i>	\$966.53	\$2,095.06	\$2,772.18
<i>Blue Shield Access + HMO</i>	\$755.91	\$1,673.82	\$2,224.57
<i>Blue Shield TRIO ACO</i>	\$690.56	\$1,543.12	\$2,054.66
<i>Health Net Salud y Mas HMO</i>	\$578.11	\$1,318.22	\$1,762.29
<i>Kaiser HMO</i>	\$807.05	\$1,776.10	\$2,357.53
<i>United Healthcare HMO</i>	\$708.76	\$1,579.52	\$2,101.98
<i>United Healthcare Harmony</i>	\$603.51	\$1,369.02	\$1,828.33
<i>PERS Gold PPO 80/20</i>	\$798.03	\$1,758.06	\$2,334.08
<i>PERS Platinum PPO 90/10</i>	\$1,269.81	\$2,701.62	\$3,560.71
Dental Plans			
<i>Delta Dental PPO</i>	\$58.26	\$119.45	\$172.14
<i>Delta Dental PPO w/Ortho</i>	\$65.15	\$133.60	\$192.52
<i>Delta Care HMO</i>	\$21.12	\$38.34	\$63.86
Vision Plan			
<i>Vision Service Plan (VSP)</i>	\$7.81	\$15.77	\$22.93

Medical rates apply to retirees under the age of 65 **only. Retirees **over** 65 contact CalPERS to enroll into a Medicare Supplement plan. Other rates apply.*