

**California's Valued Trust
Certificated Retiree Rates**

March 1, 2026 - June 30, 2026

Annual District Contribution: \$15,000

***\$1000 District Cap Increase Effective March 1, 2026**

RETIREE ONLY COVERAGE				
DAILY HOURS	PLAN NAME	MONTHLY COST	DISTRICT MONTHLY CAP	RETIREE MONTHLY COST
8	HDHP 3 (HSA eligible)	\$854.00	\$1,416.67	\$0.00
8	BRONZE	\$924.00	\$1,416.67	\$0.00
8	HDHP 2 (HSA eligible)	\$1,009.00	\$1,416.67	\$0.00
8	PPO 9B	\$1,446.00	\$1,416.67	\$29.33
8	PPO 7B	\$1,755.00	\$1,416.67	\$338.33
8	PPO 3B	\$1,988.00	\$1,416.67	\$571.33
8	WELLNESS	\$1,782.00	\$1,416.67	\$365.33

RETIREE + 1 COVERAGE				
DAILY HOURS	PLAN NAME	MONTHLY COST	DISTRICT MONTHLY CAP	RETIREE MONTHLY COST
8	HDHP 3 (HSA eligible)	\$1,467.00	\$1,416.67	\$50.33
8	BRONZE	\$1,590.00	\$1,416.67	\$173.33
8	HDHP 2 (HSA eligible)	\$1,735.00	\$1,416.67	\$318.33
8	PPO 9B	\$2,487.00	\$1,416.67	\$1,070.33
8	PPO 7B	\$3,018.00	\$1,416.67	\$1,601.33
8	PPO 3B	\$3,420.00	\$1,416.67	\$2,003.33
8	WELLNESS	\$3,066.00	\$1,416.67	\$1,649.33

RETIREE + FAMILY COVERAGE				
DAILY HOURS	PLAN NAME	MONTHLY COST	DISTRICT MONTHLY CAP	RETIREE MONTHLY COST
8	HDHP 3 (HSA eligible)	\$1,852.00	\$1,416.67	\$435.33
8	BRONZE	\$2,006.00	\$1,416.67	\$589.33
8	HDHP 2 (HSA eligible)	\$2,190.00	\$1,416.67	\$773.33
8	PPO 9B	\$3,138.00	\$1,416.67	\$1,721.33
8	PPO 7B	\$3,808.00	\$1,416.67	\$2,391.33
8	PPO 3B	\$4,315.00	\$1,416.67	\$2,898.33
8	WELLNESS	\$3,868.00	\$1,416.67	\$2,451.33

	Retiree Only	Retiree + 1	Retiree + Family
CVT DENTAL	\$48.83	\$88.43	\$127.13
CVT VISION	\$10.38	\$19.28	\$29.69

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RETIREE + Spouse w/Medicare				
	PLAN NAME	MONTHLY COST	DISTRICT MONTHLY CAP	RETIREE MONTHLY COST
	PPO 9B	\$2,028.00	\$1,416.67	\$611.33
	PPO 7B	\$2,398.00	\$1,416.67	\$981.33
	PPO 3B	\$2,676.00	\$1,416.67	\$1,259.33

	Retiree Only	Retiree + 1	Retiree + Family
CVT DENTAL	\$48.83	\$88.43	\$127.13
CVT VISION	\$10.38	\$19.28	\$29.69