California's Valued Trust
Retiree Rates
July 1, 2026 - September 30, 2027
Management/Supervisory/Confidential
Annual District Contribution: $16,000

RETIREE ONLY COVERAGE				
DAILY HOURS	PLAN NAME	MONTHLY COST	DISTRICT MONTHLY CAP	RETIREE MONTHLY COST
8	HDHP **3** (HSA eligible)	$926.00	$1,333.33	**$0.00**
8	BRONZE	$1,003.00	$1,333.33	**$0.00**
8	HDHP **2** (HSA eligible)	$1,095.00	$1,333.33	**$0.00**
8	PPO 9B	$1,570.00	$1,333.33	**$236.67**
8	PPO 8B	$1,748.00	$1,333.33	**$414.67**
8	PPO 6B	$1,921.00	$1,333.33	**$587.67**
8	WELLNESS	$1,935.00	$1,333.33	**$601.67**

RETIREE + 1 COVERAGE				
DAILY HOURS	PLAN NAME	MONTHLY COST	DISTRICT MONTHLY CAP	RETIREE MONTHLY COST
8	HDHP **3** (HSA eligible)	$1,593.00	$1,333.33	**$259.67**
8	BRONZE	$1,726.00	$1,333.33	**$392.67**
8	HDHP **2** (HSA eligible)	$1,884.00	$1,333.33	**$550.67**
8	PPO 9B	$2,700.00	$1,333.33	**$1,366.67**
8	PPO 8B	$3,006.00	$1,333.33	**$1,672.67**
8	PPO 6B	$3,303.00	$1,333.33	**$1,969.67**
8	WELLNESS	$3,328.00	$1,333.33	**$1,994.67**

RETIREE + FAMILY COVERAGE				
DAILY HOURS	PLAN NAME	MONTHLY COST	DISTRICT MONTHLY CAP	RETIREE MONTHLY COST
8	HDHP **3** (HSA eligible)	$2,010.00	$1,333.33	**$676.67**
8	BRONZE	$2,178.00	$1,333.33	**$844.67**
8	HDHP **2** (HSA eligible)	$2,377.00	$1,333.33	**$1,043.67**
8	PPO 9B	$3,406.00	$1,333.33	**$2,072.67**
8	PPO 8B	$3,792.00	$1,333.33	**$2,458.67**
8	PPO 6B	$4,167.00	$1,333.33	**$2,833.67**
8	WELLNESS	$4,198.00	$1,333.33	**$2,864.67**

	Retiree Only	Retiree + 1	Retiree + Family
CVT DENTAL	$48.18	$89.64	$136.81
CVT VISION	$10.38	$19.28	$29.69

California's Valued Trust
Retiree Rates
October 1, 2026 - September 30, 2027
Management/Supervisory/Confidential
Annual District Contribution: $16,000

RETIREE + Spouse w/Medicare				
	PLAN NAME	MONTHLY COST	DISTRICT MONTHLY CAP	RETIREE MONTHLY COST
	PPO 9B	$2,152.00	$1,333.33	**$818.67**
	PPO 8B	$2,362.00	$1,333.33	**$1,028.67**
	PPO 6B	$2,567.00	$1,333.33	**$1,233.67**

	Retiree Only	Retiree + 1	Retiree + Family
CVT DENTAL	$48.18	$89.64	$136.81
CVT VISION	$10.38	$19.28	$29.69