## Superior Court of California, County of San Bernardino Rate History

	2020 Monthly Rates	2021 Monthly Rates	2022 Monthly Rates
Non-Kaiser HMO	Blue Shield	Blue Shield	Blue Shield - Actives
EE Only	\$791.08	\$789.99	\$823.08
EE+1	\$1,582.20	\$1,598.02	\$1,646.20
EE+Family	\$2,229.98	\$2,252.28	\$2,320.19
Blue Shield HMO	Blue Shield - Early Retirees	Blue Shield - Early Retirees	Blue Shield - Early Retirees
EE Only	-	-	\$1,021.96
EE+1	-	-	\$2,043.98
EE+Family	-	-	\$2,880.82
ACO/Trio HMO	Blue Shield Trio ACO HMO	Blue Shield Trio ACO HMO	Blue Shield Trio - Actives
EE Only	\$664.87	\$671.52	\$691.77
EE+1	\$1,329.77	\$1,343.07	\$1,383.56
EE+Family	\$1,874.19	\$1,892.93	\$1,950.00
ACO/Trio HMO	Blue Shield Trio - Early Retirees	Blue Shield Trio - Early Retirees	Blue Shield Trio - Early Retirees
EE Only	-	-	\$858.92
EE+1	-	-	\$1,717.88
EE+Family	-	-	\$2,421.10
PPO	Blue Shield PPO - Actives	Blue Shield PPO - Actives	Blue Shield PPO - Actives
EE Only	\$1,787.26	\$1,805.13	\$1,859.55
EE+1	\$3,574.54	\$3,610.29	\$3,719.14
EE+Family	\$5,038.05	\$5,088.43	\$5,241.85
PPO	Blue Shield PPO - Early Retirees	Blue Shield PPO - Early Retirees	Blue Shield PPO - Early Retirees
EE Only	-	-	\$2,308.89
EE+1	-	-	\$4,617.81
EE+Family	-	-	\$6,508.45
Non Kaiser PPO for Medicare	Blue Shield COB PPO	Blue Shield COB PPO	Blue Shield COB PPO
Retiree with Medicare A & B	\$587.67	\$593.55	\$632.78
Retiree + Spouse (Both w/MC)	\$1,175.34	\$1,187.09	\$1,265.56
Kaiser HMO	Kaiser HMO - Actives	Kaiser HMO - Actives	Kaiser HMO - Actives
EE Only	\$584.39	\$638.32	\$624.80
EE+1	\$1,168.77	\$1,276.64	\$1,249.60
EE+Family	\$1,653.81	\$1,806.44	\$1,768.19
Kaiser HMO - Early Retirees	Kaiser HMO - Early Retirees	Kaiser HMO - Early Retirees	Kaiser HMO - Early Retirees
EE Only	-	-	\$937.20
EE+1	-	-	\$1,874.40
EE+Family	-	-	\$2,652.28
Kaiser Retiree HMO	Kaiser Sr. Advantage	Kaiser Sr. Advantage	Kaiser Sr. Advantage
Member with Parts A & B	\$242.32	\$217.93	\$207.65
Member with Part B Only	\$486.64	\$529.93	\$519.65