



**Active Employee Plan Selections**  
**Diocese of Northern California**  
**Effective Date: 1/1/2025**

Plan Name	Plan Code	2024 Rates				2025 Rates				%
		Single	Plus Sps	Plus	Family	Single	Plus Sps	Plus	Family	
<b>Medical Plans</b>										
EAP (Employee Assistance Program)	MEAP	\$4	\$4	\$4	\$4	\$4	\$4	\$4	\$4	0%
Kaiser CDHP-20/HSA	MHDK	\$974	\$1,753	\$1,753	\$2,727	\$1,013	\$1,823	\$1,823	\$2,836	4.00%
Anthem BCBS CDHP-15/HSA	MHDG	\$1,019	\$1,834	\$1,834	\$2,853	\$1,060	\$1,908	\$1,908	\$2,968	4.30%
Cigna Open Access Plus CDHP-15/HSA	MCDH	\$1,019	\$1,834	\$1,834	\$2,853	\$1,060	\$1,908	\$1,908	\$2,968	4.30%
<b>Anthem BCBS BlueCard PPO 70</b>	<b>MPP4</b>	<b>\$977</b>	<b>\$1,759</b>	<b>\$1,759</b>	<b>\$2,736</b>	<b>\$1,016</b>	<b>\$1,829</b>	<b>\$1,829</b>	<b>\$2,845</b>	3.99%
Cigna Open Access Plus PPO 70	MG04	\$977	\$1,759	\$1,759	\$2,736	\$1,016	\$1,829	\$1,829	\$2,845	3.98%
Anthem BCBS BlueCard PPO 80	MPP3	\$1,077	\$1,939	\$1,939	\$3,016	\$1,120	\$2,016	\$2,016	\$3,136	3.98%
Cigna Open Access Plus PPO 80	MG03	\$1,077	\$1,939	\$1,939	\$3,016	\$1,120	\$2,016	\$2,016	\$3,136	3.98%
Kaiser Permanente EPO 80 Plan	MKLO	\$1,165	\$2,097	\$2,097	\$3,262	\$1,212	\$2,182	\$2,182	\$3,394	4.04%
Anthem BCBS BlueCard PPO 90	MPP2	\$1,188	\$2,138	\$2,138	\$3,326	\$1,319	\$2,374	\$2,374	\$3,693	11.04%
Cigna Open Access Plus PPO 90	MG02	\$1,188	\$2,138	\$2,138	\$3,326	\$1,319	\$2,374	\$2,374	\$3,693	11.03%
Anthem BCBS BlueCard PPO 100	MPP1	\$1,307	\$2,353	\$2,353	\$3,660	\$1,490	\$2,682	\$2,682	\$4,172	13.99%
Cigna Open Access Plus PPO 100	MG01	\$1,307	\$2,353	\$2,353	\$3,660	\$1,490	\$2,682	\$2,682	\$4,172	14.00%
Kaiser EPO High	MKE0	\$1,388	\$2,498	\$2,498	\$3,886	\$1,582	\$2,848	\$2,848	\$4,430	14.00%
<b>Dental Plans</b>										
<b>Delta Dental Basic</b>	<b>DDBA</b>	<b>\$56</b>	<b>\$101</b>	<b>\$101</b>	<b>\$157</b>	<b>\$57</b>	<b>\$103</b>	<b>\$103</b>	<b>\$160</b>	1.86%
Delta Dental Comprehensive	DCOM	\$67	\$121	\$121	\$188	\$69	\$124	\$124	\$193	2.71%
Delta Dental Premium	DPRE	\$88	\$158	\$158	\$246	\$90	\$162	\$162	\$252	2.39%

**Note:**

- I. A new column has been added this year to indicate the percentage increase you can expect with each plan. As you will note, if you select a PPO 70/80 plan, you can expect an average increase of 4%, whereas if you select a PPO 90/100/EPO plan, you can expect between 11%-14% rate increases as compared to 2024's rates. Due to this, we encourage you to review all plan summaries to see if you are utilizing the higher cost plans, and if not, you may want to consider selecting a lower cost plan to fit your needs in 2025.
- II. An employee is eligible to enroll in benefits if the employee is normally scheduled to work 1,000 or more compensated hours per plan year, regardless of whether they are an exempt or non-exempt employer. However, employers are not required to pay for medical and dental benefits until the employee is normally scheduled to work 1,500 or more compensated hours per plan year.
- III. Anthem and Cigna plans include preventive care, prescription benefits through Express Scripts, vision benefits through EyeMed, as well as hearing benefits. If you are enrolled in a Kaiser health plan, your pharmacy benefits will be provided by Kaiser.
- IV. EAP is included with all Medical Trust medical plans (including Kaiser). It is also available for employers to purchase for employees who waive their right to medical coverage at \$4/month per family. EAP benefits extend to the employee and their immediate family.
- V. As per our diocesan Denominational Health Plan (DHP), employers are required to pay a minimum of 80% of the lowest cost plan for both the medical and dental plans, for eligible employees. These base plans include Anthem BCBS BlueCard PPO 70 and Delta Dental Basic, as highlighted above.