

Active Employees Benefit Summary

9/6/2018

**EMPLOYER CONTRIBUTIONS 2018-2019 (1/1/19)**

	Classified Management/ Confidential	Certificated Management (Excluding Superintendents)	Certificated	CSEA	Teamsters	Part-Time Teamsters
<b>Medical</b>					Benefit eligible after 6/1/10	Hired before 6/1/10 and less than full-time
<b>Single</b>	\$629.00	\$629.00	\$675.00*	\$1075.00*	\$661.00*	\$1075.00 or prorated based on FTE
<b>2-party</b>	\$1,313.00	\$900.00	\$1400.00*	\$1,373	\$1347.00*	\$1075.00 or prorated based on FTE
<b>Family</b>	\$1,529.00	\$1,150.00	\$1785.00*	\$1,373	\$1747.00*	\$1075.00 or prorated based on FTE
<b>Dental</b>	\$58.49/\$116.96/\$197.76	\$58.49/\$116.96/\$197.76	\$58.49/\$116.96/\$197.76	\$58.49/\$116.96/\$197.76	\$58.49/\$116.96/\$197.76	\$58.49/\$116.96/\$197.76
<b>Vision</b>	\$15.14	\$15.14	\$15.14	\$15.14	\$15.14	\$15.14
<b>Life Ins.</b>	\$10.25	\$10.25	\$0.00	\$0.00	\$0.00	\$0.00
<b>ACSA</b>	\$400 per year	\$400 per year				
<b>Membership dues</b>	\$80 per year	\$80 per year				

\*Pro-rated (.5 FTE and above) for employees working less than full-time. Benefits will be calculated according to the employee's total FTE. The resulting district contribution amount will be applied to health and welfare in the following order: dental, vision and medical.

	MEDICAL PLANS	EMPLOYEE ONLY		2-PARTY		FAMILY
HMO	Anthem HMO Select	\$831.44		\$1,662.88		\$2,161.74
HMO	Anthem HMO Traditional	\$1,111.13		\$2,222.26		\$2,888.94
HMO	HealthNet SmartCare	\$901.55		\$1,803.10		\$2,344.03
HMO	Kaiser Permanente	\$768.25		\$1,536.50		\$1,997.45
HMO	Western Health Adv	\$767.01		\$1,534.02		\$1,994.23
PPO	PERS Select (80-20) (VBID)	\$543.19		\$1,086.38		\$1,412.29
PPO	PERS Choice (80-20)	\$866.27		\$1,732.54		\$2,252.30
PPO	PERSCare (90-10)	\$1,304.13		\$2,608.26		\$3,390.74