

2017 Insurance Rates and District Contributions

MEDICAL PLANS	CERTIFIED/CLASSIFIED			
	Rate	District Contribution*	Employee	COBRA Rate
KAISER DHMO 1500				
Employee Only	\$466.14	\$169.24	\$296.90	\$475.46
Employee + Spouse	\$964.95	\$254.50	\$710.45	\$984.25
Employee + Child(ren)	\$992.83	\$264.89	\$727.94	\$1,012.69
Family	\$1,459.01	\$383.08	\$1,075.93	\$1,488.19
KAISER DHMO 500				
Employee Only	\$537.70	\$169.24	\$368.46	\$578.45
Employee + Spouse	\$1,112.99	\$254.50	\$858.49	\$1,135.25
Employee + Child(ren)	\$1,145.25	\$264.89	\$880.36	\$1,168.16
Family	\$1,682.96	\$383.08	\$1,299.88	\$1,716.62
KAISER ADDED CHOICE				
Employee Only	\$947.47	\$169.24	\$778.23	\$966.42
Employee + Spouse	\$1,961.16	\$254.50	\$1,706.66	\$2,000.38
Employee + Child(ren)	\$2,018.01	\$264.89	\$1,753.12	\$2,058.37
Family	\$2,965.48	\$383.08	\$2,582.40	\$3,024.79
KAISER KHDP 5000				
Employee Only	\$326.35	\$169.24	\$157.11	\$332.88
Employee + Spouse	\$675.58	\$254.50	\$421.08	\$689.09
Employee + Child(ren)	\$695.09	\$264.89	\$430.20	\$708.99
Family	\$1,021.47	\$383.08	\$638.39	\$1,041.90

*Para Educators, ECS employees will receive \$169.24 in District Dollars if they elect medical.

DISTRICT CAFETERIA CONTRIBUTIONS					
Employee Group	Benefits		Redirected to Salary		Part-time Status
	Full-time	Part-time	Full-time	Part-time	
Administrators	\$394.00	\$ -	\$ -	\$ -	n/a
Teachers Step 1-3 and 20+	\$220.00	\$110.00	\$174.00	\$174.00	50%-60% FTE
Teachers Step 4-19	\$394.00	\$284.00	\$ -	\$ -	50%-60% FTE
Mental Health Step 1-3 and 20+	\$220.00	\$110.00	\$174.00	\$174.00	50%-60% FTE
Mental Health Step 4-19	\$394.00	\$284.00	\$ -	\$ -	50%-60% FTE
Nurses Step 1-3 and 20+	\$220.00	\$110.00	\$174.00	\$174.00	50%-60% FTE
Nurses Step 4-19	\$394.00	\$284.00	\$ -	\$ -	50%-60% FTE
Bus Drivers	\$296.90	\$148.45	\$ -	\$ -	20-30 Hours/ Week
Custodial Maintenance	\$296.90	\$148.45	\$ -	\$ -	50%-74% FTE
Educational Office Professional	\$296.90	\$148.45	\$ -	\$ -	50%-60% FTE
Early Childhood Services*	\$296.90	\$148.45	\$ -	\$ -	20-34 Hours/Week
Food Service Workers	\$296.96	\$148.45	\$ -	\$ -	4-6 Hours/ Week
Food Service Managers/ Drivers	\$296.90	n/a	\$ -	\$ -	n/a
Staff Support	\$296.90	\$148.45	\$ -	\$ -	50%-60% FTE
Mechanics	\$296.90	n/a	\$ -	\$ -	n/a

*For ECS employees some positions will receive an additional \$296.90.

DENTAL PLANS	CERTIFIED/CLASSIFIED	
	Rate	COBRA Rate
DELTA DENTAL PREMIER		
Employee Only	\$43.27	\$44.14
Employee + Spouse	\$79.38	\$80.97
Employee + Child(ren)	\$98.04	\$100.00
Family	\$136.10	\$138.82
DELTA DENTAL PPO		
Employee Only	\$32.02	\$32.66
Employee + Spouse	\$58.73	\$59.90
Employee + Child(ren)	\$72.55	\$74.00
Family	\$100.73	\$102.74
DELTA DENTAL EPO		
Employee Only	\$31.57	\$32.20
Employee + Spouse	\$57.91	\$59.07
Employee + Child(ren)	\$71.53	\$72.96
Family	\$99.31	\$101.30

VISION PLAN	CERTIFIED/CLASSIFIED	
	Rate	COBRA Rate
VISION SERVICE PLAN		
Employee Only	\$9.30	\$9.49
Employee + Spouse	\$15.24	\$15.54
Employee + Child(ren)	\$14.71	\$15.00
Family	\$24.25	\$24.74