

# CERTIFICATED ACTIVES

If you were hired **AFTER** July 1, 2012 [click here](#)

## Summary of Contributions for Employees hired **BEFORE** July 2, 2012

The total cost of the plan premiums increased this year and the District will be paying more, absorbing all of the increases. The table below summarizes the employee contribution amounts that will be effective July 1, 2014. Remember, your contributions for health care coverage are deducted tenths and before taxes which are calculated each pay period, effectively lowering your tax liability.

### Medical

#### Kaiser Permanente HMO

	Single	Two-Party	Family
Total Premium	\$484.40	\$968.81	\$1,370.87
What the District Pays	-\$477.22	-\$954.45	-\$1,350.55
What You Pay	\$7.18	\$14.36	\$20.32

#### Blue Shield Access+ HMO\*

	Single	Two-Party	Family
Total Premium	\$617.79	\$1,276.64	\$1,839.76
What the District Pays	-\$580.92	-\$1,200.48	-\$1,729.98
What You Pay	\$36.87	\$76.16	\$109.78

#### Blue Shield Spectrum PPO\*

	Single	Two-Party	Family
Total Premium	\$854.30	\$1,773.72	\$2,548.05
What the District Pays	-\$756.15	-\$1,569.98	-\$2,255.33
What You Pay	\$98.15	\$203.74	\$292.72

\*Blue Shield rates include Prescription, Mental Health/Substance Abuse, EAP and VSP vision benefits

### Dental

#### DeltaCare USA DHMO

	Single	Two-Party	Family
Total Premium	\$19.80	\$32.68	\$48.31
What the District Pays	-\$19.80	-\$32.68	-\$48.31
What You Pay	\$0.00	\$0.00	\$0.00

#### Delta Dental Network DPPO

	Single	Two-Party	Family
Total Premium	\$57.86	\$160.86	\$218.78
What the District Pays	-\$57.86	-\$55.51	-\$55.51
What You Pay	\$0.00	\$105.35	\$163.27

#### Delta Dental Incentive DPPO

	Single	Two-Party	Family
Total Premium	\$72.34	\$201.09	\$273.52
What the District Pays	-\$72.34	-\$61.91	-\$61.91
What You Pay	\$0.00	\$139.18	\$211.61

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### Medical

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What You Pay	\$7.18	\$14.36	\$20.32

#### Blue Shield Access+ HMO\*

	Single	Two-Party	Family
Total Premium	\$617.79	\$1,276.64	\$1,839.76
What the District Pays	-\$522.11	-\$1,047.96	-\$1,485.29
What You Pay	\$95.68	\$228.68	\$354.47

#### Blue Shield Spectrum PPO\*

	Single	Two-Party	Family
Total Premium	\$854.30	\$1,773.72	\$2,548.05
What the District Pays	-\$540.61	-\$1,086.90	-\$1,540.73
What You Pay	\$313.69	\$686.82	\$1,007.32

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### Dental

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