| Management & | | | |
|---|---|--|---|
| Confidential | Maxi | mum District Mon | thly Contribution |
| Employee Only | | \$882.78 | |
| Employee + One Dep. | | \$1,402.09 | |
| Employee + 2 or more D | Dep. | \$1,534.09 | |
| | | • • • • • • • | |
| Rates for Monterey Cou | unty and Nationwide | | |
| PPO PLAN 1B | Employee Only | EE+1 | Full Family |
| Medical | \$1,107.00 | \$2,214.00 | \$2,878.00 |
| Dental | \$46.16 | \$83.62 | \$120.20 |
| Vision | \$9.94 | \$18.47 | \$28.44 |
| Total | \$1,163.10 | \$2,316.09 | \$3,026.64 |
| District Pays | \$882.78 | \$1,402.09 | \$1,534.09 |
| Employee Pays | \$280.32 | \$914.00 | \$1,492.55 |
| PPO PLAN 4B | Employee Only | EE+ 1 | Full Family |
| Medical | \$981.00 | \$1,962.00 | \$2,551.00 |
| Dental | \$46.16 | \$83.62 | \$120.20 |
| Vision | \$9.94 | \$18.47 | \$28.44 |
| Total | \$1,037.10 | \$2,064.09 | \$2,699.64 |
| District Pays | \$882.78 | \$1,402.09 | \$1,534.09 |
| Employee Pays | \$154.32 | \$662.00 | \$1,165.55 |
| PPO PLAN 6B | Employee Only | EE+ 1 | Full Family |
| Medical | \$903.00 | \$1,806.00 | \$2,348.00 |
| Dental | \$46.16 | \$83.62 | \$120.20 |
| Vision | \$9.94 | \$18.47 | \$28.44 |
| Total | \$959.10 | \$1,908.09 | \$2,496.64 |
| District Pays | \$882.78 | \$1,402.09 | \$1,534.09 |
| Employee Pays | \$76.32 | \$506.00 | \$962.55 |
| | | / | |
| PPO PLAN 9B | Employee Only | EE+ 1 | Full Family |
| Medical | \$729.00 | \$1,458.00 | \$1,896.00 |
| Dental Vision | \$46.16 \$9.94 | \$83.62 \$18.47 | \$120.20 \$28.44 |
| Total | \$785.10 | \$1,560.09 | \$2,044.64 |
| District Pays | \$882.78 | \$1,402.09 | \$1,534.09 |
| Employee Pays | \$0.00 | φ1,102.00 | |
| | | \$158.00 | |
| HDHP 2 | | \$158.00 | \$510.55 |
| HDHP 2 Medical | Employee Only | | \$510.55 Full Family |
| Medical | Employee Only \$552.00 | \$1,104.00 | \$510.55 Full Family \$1,436.00 |
| | Employee Only | | \$510.55 Full Family \$1,436.00 \$120.20 |
| Medical Dental | Employee Only \$552.00 \$46.16 | \$1,104.00 \$83.62 | \$510.55 Full Family \$1,436.00 \$120.20 |
| Medical Dental Vision | Employee Only \$552.00 \$46.16 \$9.94 | \$1,104.00 \$83.62 \$18.47 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 |
| Medical Dental Vision Total | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 |
| Medical Dental Vision Total District Pays Employee Pays | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$882.78 \$0.00 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 |
| Medical Dental Vision Total District Pays | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$882.78 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family |
| Medical Dental Vision Total District Pays Employee Pays Bronze Plan | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$882.78 \$0.00 Employee Only | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 EE+ 1 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family |
| Medical Dental Vision Total District Pays Employee Pays Bronze Plan Medical Dental Vision | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$882.78 \$0.00 Employee Only \$509.00 \$46.16 \$9.94 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 EE+1 \$1,018.00 \$83.62 \$18.47 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family \$1,323.00 \$120.20 \$28.44 |
| Medical Dental Vision Total District Pays Employee Pays Bronze Plan Medical Dental Vision Total | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$882.78 \$0.00 Employee Only \$509.00 \$46.16 \$9.94 \$565.10 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 EE+1 \$1,018.00 \$83.62 \$18.47 \$1,120.09 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family \$1,323.00 \$120.20 \$28.44 \$1,471.64 |
| Medical Dental Vision Total District Pays <u>Employee Pays</u> <u>Bronze Plan</u> Medical Dental Vision Total District Pays | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$882.78 \$0.00 Employee Only \$509.00 \$46.16 \$9.94 \$565.10 \$882.78 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 EE+ 1 \$1,018.00 \$83.62 \$18.47 \$1,120.09 \$1,402.09 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family \$1,323.00 \$120.20 \$28.44 \$1,471.64 \$1,534.09 |
| Medical Dental Vision Total District Pays Employee Pays Bronze Plan Medical Dental Vision Total | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$882.78 \$0.00 Employee Only \$509.00 \$46.16 \$9.94 \$565.10 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 EE+1 \$1,018.00 \$83.62 \$18.47 \$1,120.09 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family \$1,323.00 \$120.20 \$28.44 \$1,471.64 \$1,534.09 |
| Medical Dental Vision Total District Pays <u>Employee Pays</u> <u>Bronze Plan</u> Medical Dental Vision Total District Pays | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$882.78 \$0.00 Employee Only \$509.00 \$46.16 \$9.94 \$565.10 \$882.78 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 EE+ 1 \$1,018.00 \$83.62 \$18.47 \$1,120.09 \$1,402.09 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family \$1,323.00 \$120.20 \$28.44 \$1,471.64 \$1,534.09 |
| Medical Dental Vision Total District Pays Employee Pays Bronze Plan Medical Dental Vision Total District Pays Employee Pays | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$882.78 \$0.00 Employee Only \$509.00 \$46.16 \$9.94 \$565.10 \$882.78 \$0.00 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 EE+ 1 \$1,018.00 \$83.62 \$18.47 \$1,120.09 \$1,402.09 \$0.00 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family \$1,323.00 \$120.20 \$28.44 \$1,471.64 \$1,534.09 \$0.000 Full Family \$2,382.00 |
| Medical Dental Vision Total District Pays Employee Pays Bronze Plan Medical Dental Vision Total District Pays Employee Pays Wellness RX-C Medical Dental | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$882.78 \$0.00 Employee Only \$509.00 \$46.16 \$9.94 \$565.10 \$882.78 \$0.00 Employee Only \$916.00 \$916.00 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 EE+1 \$1,018.00 \$83.62 \$18.47 \$1,120.09 \$1,402.09 \$0.00 EE+1 \$1,832.00 \$83.62 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family \$1,323.00 \$1,20.20 \$28.44 \$1,471.64 \$1,534.09 \$0.00 Full Family \$2,382.00 \$120.20 |
| Medical Dental Vision Total District Pays Employee Pays Bronze Plan Medical Dental Vision Total District Pays Employee Pays Wellness RX-C Medical Dental Vision | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$840.78 \$0.00 Employee Only \$509.00 \$46.16 \$9.94 \$505.00 \$882.78 \$0.00 \$882.78 \$0.00 \$882.78 \$0.00 \$882.78 \$0.00 \$882.78 \$0.00 \$846.16 \$9.94 \$9.94 \$9.94 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 EE+1 \$1,018.00 \$83.62 \$18.47 \$1,120.09 \$1,402.09 \$0.00 EE+1 \$1,832.00 \$1,832.00 \$83.62 \$18.47 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family \$1,323.00 \$120.20 \$28.44 \$1,471.64 \$1,534.09 \$0.00 Full Family \$2,382.00 \$120.20 \$28.44 |
| Medical Dental Vision Total District Pays Employee Pays Bronze Plan Medical Dental Vision Total District Pays Employee Pays Wellness RX-C Medical Dental Vision Total | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$882.78 \$0.00 Employee Only \$509.00 \$46.16 \$9.94 \$565.10 \$882.78 \$0.00 Employee Only \$916.00 \$46.16 \$9.94 \$916.00 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 EE+1 \$1,018.00 \$83.62 \$18.47 \$1,120.09 \$1,402.09 \$1,802.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00 \$1,803.00\$\$1,803. | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family \$1,323.00 \$120.20 \$28.44 \$1,471.64 \$1,534.09 \$0.00 Full Family \$2,382.00 \$120.20 \$28.44 \$2,530.64 |
| Medical Dental Vision Total District Pays Employee Pays Bronze Plan Medical Dental Vision Total District Pays Employee Pays Wellness RX-C Medical Dental Dental Vision | Employee Only \$552.00 \$46.16 \$9.94 \$608.10 \$840.78 \$0.00 Employee Only \$509.00 \$46.16 \$9.94 \$505.00 \$882.78 \$0.00 \$882.78 \$0.00 \$882.78 \$0.00 \$882.78 \$0.00 \$882.78 \$0.00 \$846.16 \$9.94 \$9.94 \$9.94 | \$1,104.00 \$83.62 \$18.47 \$1,206.09 \$1,402.09 \$0.00 EE+1 \$1,018.00 \$83.62 \$18.47 \$1,120.09 \$1,402.09 \$0.00 EE+1 \$1,832.00 \$1,832.00 \$83.62 \$18.47 | \$510.55 Full Family \$1,436.00 \$120.20 \$28.44 \$1,584.64 \$1,534.09 \$50.55 Full Family \$1,323.00 \$1,20.20 \$28.44 \$1,534.09 \$0.00 Full Family \$2,382.00 \$120.20 \$28.44 |

Effective: October 1, 2023 - September 31, 2024

3 Tier Rate Sheet

Certificated & Classified Management, Classified Confidential

Rates for Santa Cruz County & the HMO Plans in Zip Codes 95076,95077 Full Family HMO Plan 1 Employee Only EE+ 1 \$2 404 00 \$3,120,00 Medica \$1.211.00 Dental \$48.16 \$83.62 \$120.20 \$9.94 \$18.47 \$28.44 Vision \$1,269.10 \$3,268.64 Total \$2,506.09 \$882.78 \$1,534.09 **District Pays** \$1,402.09 **Employee Pays** \$386.32 \$1,104.00 \$1,734.55 HMO Plan 2 Employee Only EE+ 1 Full Family Medical \$1,181.00 \$2,346.00 \$3,044.00 \$120.20 Denta \$46.19 \$83.62 \$9.94 \$28.44 Vision \$18.47 Tota \$1.237.13 \$2,448.09 \$3.192.64 **District Pays** \$882.78 \$1,402.09 \$1,534.09 Employee Pays \$354.35 \$1,046.00 \$1,658.55 HMO Bronze Employee Only EE+ 1 Full Family \$2,115.00 \$2,744.00 Medica \$1.067.00 Denta \$46.16 \$83.62 \$120.20 Vision \$9.94 \$18.47 \$28.44 Total \$1,123.10 \$2,217.09 \$2,892.64 **District Pays** \$882.78 \$1,402.09 \$1,534.09 Employee Pays \$240.32 \$815.00 \$1,358.55 Rates for Santa Clara County, San Jose area Kasier Plan 2 Employee Only EE+ 1 Full Family Medical \$1,209.00 \$2,078.00 \$2,620.00 \$46.16 \$83.62 \$120.20 Denta \$9.94 \$28.44 Vision \$18.47 \$1.265.10 Total \$2.180.09 \$2.768.64 **District Pays** \$882.78 \$1,402.09 \$1,534.09 **Employee Pays** \$382.32 \$778.00 \$1.234.55 Kaiser Plan 3 Employee Only EE+ 1 Full Family Medica \$1,193.00 \$2,586.00 Dental \$46.16 \$83.62 \$120.20 Vision \$9.94 \$18.47 \$28.44 Total \$1,249.10 \$2,153.09 \$2,734.64 **District Pays** \$882.78 \$1.402.09 \$1.534.09 Employee Pays \$366.32 \$751.00 \$1,200.55 Kaiser Plan 5 Employee Only EE+ 1 **Full Family** \$1,993.00 \$2,515.00 Medica \$1,161.00 Denta \$46.16 \$120.20 \$83.62 Vision \$9.94 \$18.47 \$28 44 Tota \$1,217.10 \$2,095.09 \$2.663.64 **District Pays** \$882.78 \$1,534.09 \$1,402.09 **Employee Pays** \$334.32 \$693.00 \$1,129,55 Full Family Kaiser Bronze Employee Only EE+ 1 Medica \$1,148.00 \$1,449.00 \$46.16 \$83.62 \$120.20 Dental Vision \$9.94 \$18 47 \$28 44 Total \$725.10 \$1,250.09 \$1.597.64 **District Pays** \$882.78 \$1,402.09 \$1,534.09 **Employee Pays** \$0.00 \$0.00 \$63.55 Kaiser Welness Employee Only EE+ 1 Full Family Medica \$953.00 \$1,638.00 \$2,066.00 Dental \$46.16 \$83.62 \$120.20 Vision \$9.94 \$18.47 \$28.44 Total \$1.009.10 \$1,740.09 \$2,214,64 **District Pays** \$882.78 \$1,402.09 \$1,534.09 **Employee Pays** \$126.32 \$338.00 \$680.55

8/25/2023