

Sacramento City Unified School District

MANAGEMENT

(Unrepresented Management/Supervisors and Confidential)

Health and Welfare Twelve Month Rates

January 1, 2016 to December 31, 2016

MEDICAL PLANS

MEDICAL PLAN		Dist Pays	Employee Pays
	Full Premium	75% EE only	
Kaiser (HMO)			
Employee Only	\$635.99	\$477.00	\$158.99
Employee + 1	\$1,271.98	\$477.00	\$794.98
Family	\$1,799.85	\$477.00	\$1,322.85
Kaiser (HSA)			
Employee Only	\$530.22	\$477.00	\$53.22
Employee + 1	\$1,060.44	\$477.00	\$583.44
Family	\$1,500.53	\$477.00	\$1,023.53
Western Health Advantage (HMO)			
Employee Only	\$692.31	\$477.00	\$215.31
Employee + 1	\$1,376.86	\$477.00	\$899.86
Family	\$1,945.05	\$477.00	\$1,468.05
Western Health Advantage (HSA)			
Employee Only	\$500.06	\$477.00	\$23.06
Employee + 1	\$993.48	\$477.00	\$516.48
Family	\$1,403.02	\$477.00	\$926.02
Sutter Health Plus (HMO)			
Employee Only	\$674.10	\$477.00	\$197.10
Employee + 1	\$1,348.20	\$477.00	\$871.20
Family	\$1,907.72	\$477.00	\$1,430.72
Sutter Health Plus (HSA)			
Employee Only	\$511.14	\$477.00	\$34.14
Employee + 1	\$1,022.30	\$477.00	\$545.30
Family	\$1,466.56	\$477.00	\$989.56

DENTAL PLANS

	Delta Dental Premium	District Pays	Employee Pays
Employee Only	\$66.63	\$66.63	\$0.00
Employee + 1	\$133.26	\$66.63	\$66.63
Family	\$188.56	\$66.63	\$121.93
Delta Dental Premier Premium			
Employee Only	\$79.11	\$66.63	\$12.48
Employee + 1	\$158.22	\$66.63	\$91.59
Family	\$223.88	\$66.63	\$157.25

VISION PLAN

	Vision Premium	District Pays	Employee Pays
Employee Only	\$10.53	\$10.53	\$0.00
Employee + 1	\$21.06	\$10.53	\$10.53
Family	\$31.67	\$10.53	\$21.14

LIFE PLAN

Life Employee Pays	
Employee Only	\$ -
Employee + 1	\$0.44
Family	\$0.63

Please note: If working in a 10 or 11 month position, premiums will be adjusted according to your work calendar