## Sacramento City Unified School District 2020 Active **MANAGEMENT/UNREP/CONF/SUPV** Rate Sheet January 1, 2020 - December 31, 2020

Medical Plans	Full Premium	District Pays 100% Kaiser Rate for Employee and 50% Kaiser Family Rate	Employee Pays
Kaiser HMO	12-month ( Deductions)		Employee Pays
Employee Only	\$767.94	\$767.94	\$0.00
Employee + 1	\$1,535.88	\$1,151.91	\$383.97
Family	\$2,173.29	\$1,470.62	\$702.67
Kaiser HSA	12-month ( Deductions)		Employee Pays
Employee Only	\$596.71	\$596.71	\$0.00
Employee + 1	\$1,193.42	\$895.07	\$298.35
Family	\$1,688.70	\$1,142.71	\$545.99
Western Health HMO	12-month ( Deductions)		Employee Pays
Employee Only	\$845.15	\$767.94	\$77.21
Employee + 1	\$1,685.38	\$1,151.91	\$533.47
Family	\$2,382.79	\$1,470.62	\$912.17
Western Health HSA	12-month ( Deductions)		Employee Pays
Employee Only	\$596.53	\$596.53	\$0.00
Employee + 1	\$1,189.59	\$893.06	\$296.53
Family	\$1,681.84	\$1,139.19	\$542.65
Sutter Health Plus HMO	12-month ( Deductions)		Employee Pays
Employee Only	\$813.54	\$767.94	\$45.60
Employee + 1	\$1,627.23	\$1,151.91	\$475.32
Family	\$2,334.42	\$1,470.62	\$863.80
Sutter Health Plus HSA	12-month ( Deductions)		Employee Pays
Employee Only	\$585.46	\$585.46	\$0.00
Employee + 1	\$1,170.94	\$878.20	\$292.74
Family	\$1,679.79	\$1,132.63	\$547.16

Delta Dental	12-month ( Deductions)		Employee Pays
Employee Only	\$60.15	\$60.15	\$0.00
Employee + 1	\$120.29	\$60.15	\$60.14
Family	\$170.21	\$60.15	\$110.06
VSP Vision Plan	12-month ( Deductions) Employee Pa		
Employee Only	\$9.93	\$9.93	\$0.00
Employee + 1	\$19.86	\$9.93	\$9.93
Family	\$34.58	\$9.93	\$24.65
Sun Life Plan	12-month ( Deductions)		Employee Pays
Employee Only	\$0.00	\$0.00	\$0.00
Employee + 1	\$0.44	\$0.00	\$0.44
Family	\$0.63	\$0.00	\$0.63

<sup>\*\*</sup>Please note: If working in a 10 or 11 month position, premiums will be adjusted according to your work calendar\*\*