

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	\$834.39	\$767.94	\$66.45
Employee + 1	\$1,663.93	\$1,151.91	\$512.02
Family	\$2,352.45	\$1,470.62	\$881.83
Western Health HSA	12-month (Deductions)		Employee Pays
Employee Only	\$588.94	\$588.94	\$0.00
Employee + 1	\$1,174.45	\$881.70	\$292.75
Family	\$1,660.44	\$1,124.69	\$535.75
Sutter Health Plus HMO	12-month (Deductions)		Employee Pays
Employee Only	\$792.37	\$767.94	\$24.43
Employee + 1	\$1,584.90	\$1,151.91	\$432.99
Family	\$2,273.70	\$1,470.62	\$803.08
Sutter Health Plus HSA	12-month (Deductions)		Employee Pays
Employee Only	\$570.03	\$570.03	\$0.00
Employee + 1	\$1,140.08	\$855.06	\$285.02
Family	\$1,635.53	\$1,102.78	\$532.75

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 Pays
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

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