



Employee Health Benefits  
**2025 Active SEIU/TEAMSTERS Rate Sheet**  
 January 1, 2025 - December 31, 2025

**12-Month Deductions**

Medical Plans/Tiers	Full Premium	District Pays (up to the Kaiser active rate)	Employee Pays
<b>Kaiser HMO</b>			
Employee Only	\$1,013.81	\$1,013.81	\$0.00
Employee + 1	\$2,027.62	\$2,027.62	\$0.00
Family	\$2,869.09	\$2,869.09	\$0.00
<b>Kaiser HSA</b>			
Employee Only	\$836.36	\$836.36	\$0.00
Employee + 1	\$1,672.72	\$1,672.72	\$0.00
Family	\$2,366.90	\$2,366.90	\$0.00
<b>Western Health HMO</b>			
Employee Only	\$969.91	\$969.91	\$0.00
Employee + 1	\$1,934.18	\$1,934.18	\$0.00
Family	\$2,734.52	\$2,734.52	\$0.00
<b>Western Health HSA</b>			
Employee Only	\$681.20	\$681.20	\$0.00
Employee + 1	\$1,358.44	\$1,358.44	\$0.00
Family	\$1,920.55	\$1,920.55	\$0.00
<b>Sutter Health Plus HMO</b>			
Employee Only	\$987.80	\$987.80	\$0.00
Employee + 1	\$1,975.60	\$1,975.60	\$0.00
Family	\$2,834.00	\$2,834.00	\$0.00
<b>Sutter Health Plus HSA</b>			
Employee Only	\$715.50	\$715.50	\$0.00
Employee + 1	\$1,431.00	\$1,431.00	\$0.00
Family	\$2,052.70	\$2,052.70	\$0.00
<b>Delta Dental</b>			
Employee Only	\$56.59	\$56.59	\$0.00
Employee + 1	\$113.17	\$113.17	\$0.00
Family	\$160.14	\$160.14	\$0.00
<b>Premier Access Dental</b>			
Employee Only	\$65.25	\$65.25	\$0.00
Employee + 1	\$120.97	\$120.97	\$0.00
Family	\$173.95	\$173.95	\$0.00
<b>VSP Vision Plan</b>			
Employee Only	\$5.80	\$5.80	\$0.00
Employee + 1	\$11.59	\$11.59	\$0.00
Family	\$19.31	\$19.31	\$0.00
<b>Sun Life Plan</b>			
Employee Only	\$1.10	\$1.10	\$0.00
Employee + 1	\$1.54	\$1.10	\$0.44
Family	\$1.54	\$1.10	\$0.44