

Sacramento City Unified School District
 2019 **MANAGEMENT/UNREP/CONF/SUPV** Rate Sheet
 January 1, 2019 - December 31, 2019

Medical Plans	Full Premium	District Pays 100% for Employee Only and 50% of Kaiser Family	Employee Pays
Kaiser HMO	12-month (Deductions)		
Employee Only	\$746.37	\$746.37	\$0.00
Employee + 1	\$1,492.75	\$1,119.57	\$373.18
Family	\$2,112.24	\$1,429.31	\$682.93
Kaiser HSA	12-month (Deductions)		
Employee Only	\$579.92	\$579.92	\$0.00
Employee + 1	\$1,159.84	\$869.88	\$289.96
Family	\$1,641.17	\$1,110.55	\$530.62
Western Health HMO	12-month (Deductions)		
Employee Only	\$787.29	\$746.37	\$40.92
Employee + 1	\$1,570.00	\$1,119.57	\$450.43
Family	\$2,219.66	\$1,429.31	\$790.35
Western Health HSA	12-month (Deductions)		
Employee Only	\$555.70	\$555.70	\$0.00
Employee + 1	\$1,108.07	\$831.89	\$276.18
Family	\$1,566.72	\$1,061.21	\$505.51
Sutter Health Plus HMO	12-month (Deductions)		
Employee Only	\$769.29	\$746.37	\$22.92
Employee + 1	\$1,538.73	\$1,119.57	\$419.16
Family	\$2,207.48	\$1,429.31	\$778.17
Sutter Health Plus HSA	12-month (Deductions)		
Employee Only	\$552.73	\$552.73	\$0.00
Employee + 1	\$1,106.30	\$829.52	\$276.78
Family	\$1,587.41	\$1,070.07	\$517.34

Delta Dental	District Pays Employee Only		
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	District Pays Employee Only		
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			
Employee Only	\$0.00		\$0.00
Employee + 1	\$0.44		\$0.44
Family	\$0.63		\$0.63

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