

Sacramento City Unified School District

2018 **SCTA** Active Rate Sheet

July 1, 2018 - June 30, 2019

| Medical Plans/Tiers | Full Premium | District Pays | Employee Pays |
|--|-------------------------------|---------------|---------------|
| Kaiser HMO Certificated | 12-month (Deductions) | | |
| Employee Only | \$607.58 | \$607.58 | \$0.00 |
| Employee + 1 | \$1,251.16 | \$1,251.16 | \$0.00 |
| Family | \$1,719.46 | \$1,719.46 | \$0.00 |
| | | | |
| Health Net HMO Certificated | 12-month (Deductions) | | |
| Employee Only | \$986.54 | \$986.54 | \$0.00 |
| Employee + 1 | \$1,973.06 | \$1,973.06 | \$0.00 |
| Family | \$2,791.89 | \$2,791.89 | \$0.00 |
| | | | |
| Delta Dental | 12-month (Deductions) | | |
| Employee Only | \$60.29 | \$60.29 | \$0.00 |
| Employee + 1 | \$120.58 | \$120.58 | \$0.00 |
| Family | \$170.62 | \$170.62 | \$0.00 |
| | | | |
| Premier Dental | 12-month (Deductions) | | |
| Employee Only | \$65.25 | \$65.25 | \$0.00 |
| Employee + 1 | \$120.97 | \$120.97 | \$0.00 |
| Family | \$173.95 | \$173.95 | \$0.00 |
| | | | |
| VSP Vision Plan | | | |
| Employee Only | \$21.84 | \$21.84 | \$0.00 |
| Employee +1 | \$14.50 | \$14.50 | \$0.00 |
| Family | \$14.50 | \$14.50 | \$0.00 |
| | | | |
| Sun Life Plan | | | |
| Employee Only | | \$0.00 | \$0.00 |
| Employee + 1 | | \$0.00 | \$0.44 |
| Family | | \$0.00 | \$0.63 |

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