

MONTHLY EMPLOYEE CONTRIBUTION FOR THE 2017-18 SCHOOL YEAR

**HEALTH INSURANCE RATES FOR
CSEA, MANAGEMENT, CLASSIFIED CONFIDENTIAL, OTHER CLASSIFIED AND NURSES,
SPEECH, PSYCHOLOGISTS, AND SOCIAL WORKERS
(NOT TEACHERS)**

ANTHEM BLUE CROSS (PPO)
KAISER TRADITIONAL (HMO)

Plan	10-Pay Employee Monthly Deduction	11-Pay Employees Monthly Deduction	12-Pay Employees Monthly Deduction
PBC 100% D-\$20	206.40	187.64	172.00
PBC 90% G-\$20	58.80	53.54	49.00
PBC 90% A-\$20	198.00	180.00	165.00
PBC 80% C-\$20	170.40	154.91	142.00
KAISER TRADITIONAL \$10	12.00	13.09	14.40

**HOURLY, TEMPORARY, SEASONAL AND OTHER EMPLOYEES NOT ELIGIBLE FOR THE
DISTRICT PAID HELTH PLANS
(THESE EMPLOYEES ARE NOT ELIGIBLE FOR DENTAL, VISION AND LIFE BENEFITS)**

ANTHEM ANCHOR BRONZE (PPO)

PBC 2-TIER ANCHOR BRONZE	SINGLE	EMPLOYEE + CHILDREN
EMPLOYEE MONTHLY COST	526.00	826.00