

**SINGLE/FAMILY RATE
CERTIFICATED EMPLOYEES
Share of Cost
10/01/18 - 09/30/19**

Full Bundle:
Medical, Delta PPO
Dental, Vision,
Basic Life

FTE	Anthem	Anthem	Anthem	Anthem	Anthem	Anthem	Anthem	Anthem	Kaiser	Kaiser	Kaiser	Kaiser
	High HMO	High HMO	Low HMO	Low HMO	High PPO	High PPO	Low PPO	Low PPO	High HMO	High HMO	Low HMO	Low HMO
	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY
	w/Delta DPO Dental											
100%	\$275.30	\$555.30	\$164.30	\$416.30	\$465.30	\$793.30	\$149.30	\$398.30	\$161.30	\$414.30	\$123.30	\$365.30
83%	\$438.50	\$718.50	\$327.50	\$579.50	\$628.50	\$956.50	\$312.50	\$561.50	\$324.50	\$577.50	\$286.50	\$528.50
80%	\$467.30	\$747.30	\$356.30	\$608.30	\$657.30	\$985.30	\$341.30	\$590.30	\$353.30	\$606.30	\$315.30	\$557.30
75%	\$515.30	\$795.30	\$404.30	\$656.30	\$705.30	\$1,033.30	\$389.30	\$638.30	\$401.30	\$654.30	\$363.30	\$605.30
70%	\$563.30	\$843.30	\$452.30	\$704.30	\$753.30	\$1,081.30	\$437.30	\$686.30	\$449.30	\$702.30	\$411.30	\$653.30
67%	\$592.10	\$872.10	\$481.10	\$733.10	\$782.10	\$1,110.10	\$466.10	\$715.10	\$478.10	\$731.10	\$440.10	\$682.10
60%	\$659.30	\$939.30	\$548.30	\$800.30	\$849.30	\$1,177.30	\$533.30	\$782.30	\$545.30	\$798.30	\$507.30	\$749.30
50%	\$755.30	\$1,035.30	\$644.30	\$896.30	\$945.30	\$1,273.30	\$629.30	\$878.30	\$641.30	\$894.30	\$603.30	\$845.30

Full Bundle:
Medical, DeltaCare
HMO Dental,
Vision, Basic Life

FTE	Anthem	Anthem	Anthem	Anthem	Anthem	Anthem	Anthem	Anthem	Kaiser	Kaiser	Kaiser	Kaiser
	High HMO	High HMO	Low HMO	Low HMO	High PPO	High PPO	Low PPO	Low PPO	High HMO	High HMO	Low HMO	Low HMO
	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY
	w/Delta Care HMO Dental											
100%	\$213.57	\$493.57	\$102.57	\$354.57	\$403.57	\$731.57	\$87.57	\$336.57	\$99.57	\$352.57	\$61.57	\$303.57
83%	\$376.77	\$656.77	\$265.77	\$517.77	\$566.77	\$894.77	\$250.77	\$499.77	\$262.77	\$515.77	\$224.77	\$466.77
80%	\$405.57	\$685.57	\$294.57	\$546.57	\$595.57	\$923.57	\$279.57	\$528.57	\$291.57	\$544.57	\$253.57	\$495.57
75%	\$453.57	\$733.57	\$342.57	\$594.57	\$643.57	\$971.57	\$327.57	\$576.57	\$339.57	\$592.57	\$301.57	\$543.57
70%	\$501.57	\$781.57	\$390.57	\$642.57	\$691.57	\$1,019.57	\$375.57	\$624.57	\$387.57	\$640.57	\$349.57	\$591.57
67%	\$530.37	\$810.37	\$419.37	\$671.37	\$720.37	\$1,048.37	\$404.37	\$653.37	\$416.37	\$669.37	\$378.37	\$620.37
60%	\$597.57	\$877.57	\$486.57	\$738.57	\$787.57	\$1,115.57	\$471.57	\$720.57	\$483.57	\$736.57	\$445.57	\$687.57
50%	\$693.57	\$973.57	\$582.57	\$834.57	\$883.57	\$1,211.57	\$567.57	\$816.57	\$579.57	\$832.57	\$541.57	\$783.57

Medical/Life Only:
No Dental or Vision
Coverage

FTE	Anthem	Anthem	Anthem	Anthem	Anthem	Anthem	Anthem	Anthem	Kaiser	Kaiser	Kaiser	Kaiser
	High HMO	High HMO	Low HMO	Low HMO	High PPO	High PPO	Low PPO	Low PPO	High HMO	High HMO	Low HMO	Low HMO
	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY
	MED/LIFE ONLY											
100%	\$167.37	\$447.37	\$56.37	\$308.37	\$357.37	\$685.37	\$41.37	\$290.37	\$53.37	\$306.37	\$15.37	\$257.37
83%	\$330.57	\$610.57	\$219.57	\$471.57	\$520.57	\$848.57	\$204.57	\$453.57	\$216.57	\$469.57	\$178.57	\$420.57
80%	\$359.37	\$639.37	\$248.37	\$500.37	\$549.37	\$877.37	\$233.37	\$482.37	\$245.37	\$498.37	\$207.37	\$449.37
75%	\$407.37	\$687.37	\$296.37	\$548.37	\$597.37	\$925.37	\$281.37	\$530.37	\$293.37	\$546.37	\$255.37	\$497.37
70%	\$455.37	\$735.37	\$344.37	\$596.37	\$645.37	\$973.37	\$329.37	\$578.37	\$341.37	\$594.37	\$303.37	\$545.37
67%	\$484.17	\$764.17	\$373.17	\$625.17	\$674.17	\$1,002.17	\$358.17	\$607.17	\$370.17	\$623.17	\$332.17	\$574.17
60%	\$551.37	\$831.37	\$440.37	\$692.37	\$741.37	\$1,069.37	\$425.37	\$674.37	\$437.37	\$690.37	\$399.37	\$641.37
50%	\$647.37	\$927.37	\$536.37	\$788.37	\$837.37	\$1,165.37	\$521.37	\$770.37	\$533.37	\$786.37	\$495.37	\$737.37