

Effective 7/1/2023

BARGAINING UNIT PER MONTH(10 MONTHS) COST OF BENEFITS FOR THE 2023-2024 SCHOOL YEAR
 All Employee contributions for medical, dental and vision will be taken pre-tax 10thly unless the post-tax form is signed

CLASSIFIED

		MEDICAL										COMPLETE CARE	DELTA DENTAL	EYE MED	VISION	LIFE
FTE CONTRACT		KAISER DHMO 500		KAISER HMO 30		ABC DHMO 500 SELECT		ABC HMO 30 FULL NETWORK		ABC HMO 20 FULL NETWORK						
		SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY					
6.25 OR MORE HRS PER DAY	100% EMPLOYEE	97.00	267.00	210.00	484.00	206.00	531.00	307.00	696.00	415.00	834.00	2.50	0.00	0.00	0.00	
	DISTRICT	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>27.50</u>	<u>115.99</u>	<u>13.26</u>	<u>13.80</u>	
	TOTAL	1,408.60	1,578.60	1,521.60	1,795.60	1,517.60	1,842.60	1,618.60	2,007.60	1,726.60	2,145.60	30.00	115.99	13.26	13.80	
4 HRS BUT LESS THAN 6.25 HRS PER DAY	20/80% EMPLOYEE	359.32	529.32	472.32	746.32	468.32	793.32	569.32	958.32	677.32	1,096.32	2.50	23.20	2.65	2.76	
	DISTRICT	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>27.50</u>	<u>92.79</u>	<u>10.61</u>	<u>11.04</u>	
	TOTAL	1,408.60	1,578.60	1,521.60	1,795.60	1,517.60	1,842.60	1,618.60	2,007.60	1,726.60	2,145.60	30.00	115.99	13.26	13.80	
LESS THAN 4 HOURS PER DAY	40/60% EMPLOYEE	621.64	684.77	684.77	1,008.64	730.64	936.77	831.64	1,086.77	939.64	1,358.64	2.50	55.40	5.30	5.52	
	DISTRICT	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>27.50</u>	<u>69.59</u>	<u>7.96</u>	<u>8.28</u>	
	TOTAL	1,408.60	1,471.73	1,471.73	1,795.60	1,517.60	1,723.73	1,618.60	1,873.73	1,726.60	2,145.60	30.00	124.99	13.26	13.80	

		ABC PPO 750		ABC PPO 500		ABC H.S.A. 3000		ABC H.S.A. 1500		KAISER VC 2500		COMPLETE CARE	DELTA DENTAL	EYE MED	VISION	LIFE
		SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY					
100%	EMPLOYEE	575.00	1,661.00	968.00	1,982.00	303.00	668.00	427.00	850.00	9.00	221.00	2.50	0.00	0.00	0.00	
	DISTRICT	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>1,311.60</u>	<u>27.50</u>	<u>115.99</u>	<u>13.26</u>	<u>13.78</u>	
	TOTAL	1,886.60	2,972.60	2,279.60	3,293.60	1,614.60	1,979.60	1,738.60	2,161.60	1,320.60	1,532.60	30.00	115.99	13.26	13.78	
20/80%	EMPLOYEE	837.32	1,923.32	1,230.32	2,244.32	565.32	930.32	689.32	1,112.32	271.32	483.32	2.50	23.20	2.65	2.76	
	DISTRICT	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>1,049.28</u>	<u>27.50</u>	<u>92.79</u>	<u>10.61</u>	<u>11.02</u>	
	TOTAL	1,886.60	2,972.60	2,279.60	3,293.60	1,614.60	1,979.60	1,738.60	2,161.60	1,320.60	1,532.60	30.00	115.99	13.26	13.78	
40/60%	EMPLOYEE	1,099.64	2,185.64	1,492.64	2,506.64	827.64	1,192.64	951.64	1,374.64	533.64	745.64	2.50	55.40	5.77	5.51	
	DISTRICT	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>786.96</u>	<u>27.50</u>	<u>69.59</u>	<u>7.96</u>	<u>8.27</u>	
	TOTAL	1,886.60	2,972.60	2,279.60	3,293.60	1,614.60	1,979.60	1,738.60	2,161.60	1,320.60	1,532.60	30.00	124.99	13.73	13.78	