

Classified CSEA 651 Employees ONLY

2021-2022 Benefit Plan Premiums and District Contribution Benefit Year: October 1, 2021 – September 30, 2022

If you are adding a dependent, verification **must** be provided to Human Resources.

- Dependent Verification documents for adding spouse or domestic partner include;
 Filed Tax return showing joint filing.
- Dependent verification documents for children include: Birth Certificate, Adoption Paperwork or Document Granting Legal Guardianship by the court, up until age 18.

Classified CSEA 651 Monthly District Contribution			
Single-Party	Two-Party	Family	
\$1,050.69	\$1,451.57	\$1,864.57	

	Single-Party	Two-Party	Family
Medical Plans			
НМО			
Kaiser Permanente \$15; Rx \$5-20 (30 Day)	\$688.00	\$1,376.00	\$1,789.00
Kaiser Permanente \$0; Rx \$5-20 (30 Day)	\$736.00	\$1,472.00	\$1,914.00
Blue Shield Trio Network \$10; Rx \$5-20 (30 Day)	\$723.00	\$1,433.00	\$1,870.00
Blue Shield Full Network \$10; Rx \$5-20 (30 Day)	\$752.00	\$1,494.00	\$1,950.00
PPO			
Blue Shield 90G \$20; Rx \$5-20 (30 Day)	\$803.00	\$1,599.00	\$2,087.00
Blue Shield 100A \$10; Rx \$5-20 (30 Day)	\$931.00	\$1,863.00	\$2,433.00
Blue Shield 2-Tier Anchor Bronze			
(Spouses are not eligible)	\$490.00	\$999.00	\$999.00
Dental Plan	Composite		
DeltaCare HMO	\$37.87		
Delta Dental PPO Plan 1500; \$2,000 Orthodontics	\$107.40		
Delta Dental PPO Incentive Plan Unlimited;	\$149.40		
\$2,000 Orthodontics			
Vision Plan	Composite		
VSP Signature Plan C, Single \$0 Copay	\$27.70		
Basic Life Insurance	Composite		
MetLife Basic Life and AD&D - \$75,000	\$10.00		