

**OTHER NORTHERN
2019 MATRIX**

.5750-.6249



LPPA 60% EMPLOYEES WITH 2016 CAPS

Rates effective with paychecks 12/31/18 to 11/30/19; Insurance Effective on 1/1/19

									PAYROLL USE ONLY		
MEDICAL PROVIDER	PLAN	TIERS	MEDICAL	DENTAL	VISION	BENEFITS TOTAL	DISTRICT CAP	EMPLOYEE COST PER MONTH	EE Health Cost	ER Health Cost	
				eff 9/30/17	eff 9-1-15						
22 4030											
KAISER HMO											
KP01	E70	SELF	1	\$783.13	\$145.64	\$25.00	\$953.77	\$463.23	\$490.54	\$319.90	\$463.23
	D70	SELF + 1 DEPENDENT	2	\$1,566.26	\$145.64	\$25.00	\$1,736.90	\$463.23	\$1,273.67	\$1,103.03	\$463.23
	F70	SELF + DEPENDENTS	3	\$2,036.14	\$145.64	\$25.00	\$2,206.78	\$463.23	\$1,743.55	\$1,572.91	\$463.23
52 4010											
BLUE SHIELD ACCESS HMO											
BA01	E70	SELF	1	\$976.81	\$145.64	\$25.00	\$1,147.45	\$463.23	\$684.22	\$513.58	\$463.23
	D70	SELF + 1 DEPENDENT	2	\$1,953.62	\$145.64	\$25.00	\$2,124.26	\$463.23	\$1,661.03	\$1,490.39	\$463.23
	F70	SELF + DEPENDENTS	3	\$2,539.71	\$145.64	\$25.00	\$2,710.35	\$463.23	\$2,247.12	\$2,076.48	\$463.23
41 4040											
Athem Blue Cross- PERS CHOICE PPO 80/20											
CH01	E70	SELF	1	\$866.95	\$145.64	\$25.00	\$1,037.59	\$463.23	\$574.36	\$403.72	\$463.23
	D70	SELF + 1 DEPENDENT	2	\$1,733.90	\$145.64	\$25.00	\$1,904.54	\$463.23	\$1,441.31	\$1,270.67	\$463.23
	F70	SELF + DEPENDENTS	3	\$2,254.07	\$145.64	\$25.00	\$2,424.71	\$463.23	\$1,961.48	\$1,790.84	\$463.23
42 4050											
PERS SELECT PPO 80/20											
SE01	E70	SELF	1	\$511.34	\$145.64	\$25.00	\$681.98	\$463.23	\$218.75	\$48.11	\$463.23
	D70	SELF + 1 DEPENDENT	2	\$1,022.68	\$145.64	\$25.00	\$1,193.32	\$463.23	\$730.09	\$559.45	\$463.23
	F70	SELF + DEPENDENTS	3	\$1,329.48	\$145.64	\$25.00	\$1,500.12	\$463.23	\$1,036.89	\$866.25	\$463.23
43 4060											
PERS CARE PPO 90/10											
CA01	E70	SELF	1	\$1,085.83	\$145.64	\$25.00	\$1,256.47	\$463.23	\$793.24	\$622.60	\$463.23
	D70	SELF + 1 DEPENDENT	2	\$2,171.66	\$145.64	\$25.00	\$2,342.30	\$463.23	\$1,879.07	\$1,708.43	\$463.23
	F70	SELF + DEPENDENTS	3	\$2,823.16	\$145.64	\$25.00	\$2,993.80	\$463.23	\$2,530.57	\$2,359.93	\$463.23

rates are subject to change throughout the year

- .Dental and Vision plans require 100% participation for full -time employees *
- .Waiving medical coverage requires completing a HEALTH ENROLLMENT form
- District contributions are subject to change due to on-going bargaining group negotiations**



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MEDICAL PROVIDER		PLAN	TIERS	MEDICAL	DENTAL	VISION	BENEFITS TOTAL	DISTRICT CAP	EMPLOYEE COST PER MONTH	EE	ER
										Health Cost	Health Cost
				eff 9/30/17		eff 9-1-15					
Anthem HMO Select											
AHS1	E20	SELF	1	\$592.23	\$145.64	\$25.00	\$762.87	\$463.23	\$299.64	\$129.00	\$463.23
	D20	SELF + 1 DEPENDENT	2	\$1,184.46	\$145.64	\$25.00	\$1,355.10	\$463.23	\$891.87	\$721.23	\$463.23
	F20	SELF + DEPENDENTS	3	\$1,539.80	\$145.64	\$25.00	\$1,710.44	\$463.23	\$1,247.21	\$1,076.57	\$463.23
Anthem HMO Traditional											
AHT1	E20	SELF	1	\$1,334.38	\$145.64	\$25.00	\$1,505.02	\$463.23	\$1,041.79	\$871.15	\$463.23
	D20	SELF + 1 DEPENDENT	2	\$2,668.76	\$145.64	\$25.00	\$2,839.40	\$463.23	\$2,376.17	\$2,205.53	\$463.23
	F20	SELF + DEPENDENTS	3	\$3,469.39	\$145.64	\$25.00	\$3,640.03	\$463.23	\$3,176.80	\$3,006.16	\$463.23
United HealthCare HMO PLAN											
UN01	E20	SELF	1	N/A	N/A	N/A	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	D20	SELF + 1 DEPENDENT	2	N/A	N/A	N/A	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	F20	SELF + DEPENDENTS	3	N/A	N/A	N/A	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Western Health Advantage HMO PLAN											
Western Health Advantage		SELF	1	\$696.68	\$145.64	\$25.00	\$867.32	\$463.23	\$404.09	\$233.45	\$463.23
		SELF + 1 DEPENDENT	2	\$1,393.36	\$145.64	\$25.00	\$1,564.00	\$463.23	\$1,100.77	\$930.13	\$463.23
		SELF + DEPENDENTS	3	\$1,811.37	\$145.64	\$25.00	\$1,982.01	\$463.23	\$1,518.78	\$1,348.14	\$463.23

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Basic Premium Rates - OTHER NORTHERN CALIFORNIA

Alpine, Butte, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Plumas, San Benito, Shasta, Sierra, Siskiyou, Stanislaus, Tehama, Trinity and Tuolumne