

Be cautious that you have clicked the correct "sheet/tab" for your unit and paycheck calendar

2024 MDEA/DMA/CSEA Medical Rates and Deductions for 11 Month Employees

MEDICAL PLANS	CaPERS 2023 RATES	CaPERS 2024 RATES	2023 MDUSD Coverage Rate	2024 MDUSD Coverage Rate based on yearly increase/negotiations	11 MONTH EMPLOYEES	
					2023 Deductions Remain the Same through end of November 2023 paycheck	*2024 Deductions: End of December 2023 to end of June 2023 paycheck for Jan. to Aug. coverage
ANTHEM BLUE CROSS - Two (2) HMO Plans						
Anthem Select HMO 1 Party	1,128.83	1,138.86	735.47	1021.41	393.36	134.23
Anthem Select HMO 2 Party	2,257.66	2,277.72	1,470.95	2,042.82	786.71	268.46
Anthem Select HMO Family	2,934.96	2,961.04	1,912.23	2,655.67	1022.73	348.99
Anthem Traditional HMO 1 Party	1,210.71	1,339.70	735.47	1021.41	475.24	363.76
Anthem Traditional HMO 2 Party	2,421.42	2,679.40	1,470.95	2,042.82	950.47	727.52
Anthem Traditional HMO Family	3,147.85	3,483.22	1,912.23	2,655.67	1,235.62	945.77
BLUE SHIELD - Two (2) HMO Plans						
Access + HMO 1 Party	1,035.21	1,076.84	735.47	1021.41	299.74	63.35
Access + HMO 2 Party	2,070.42	2,153.68	1,470.95	2,042.82	599.47	126.70
Access + HMO Family	2,691.55	2,799.78	1,912.23	2,655.67	779.32	164.70
KAISER HMO						
Kaiser 1 Party	913.74	1021.41	735.47	1021.41	178.27	0.00
Kaiser 2 Party	1,827.48	2,042.82	1,470.95	2,042.82	356.53	0.00
Kaiser Family	2,375.72	2,655.67	1,912.23	2,655.67	463.49	0.00
ANTHEM BLUE CROSS - PPO Plans						
PERS Platinum PPO 1 Party	1,200.12	1,314.27	735.47	1021.41	464.65	334.70
PERS Platinum PPO 2 Party	2,400.24	2,628.54	1,470.95	2,042.82	929.29	669.39
PERS Platinum PPO Family	3,120.31	3,417.10	1,912.23	2,655.67	1,208.08	870.21
PERS Gold PPO 1 Party	825.61	914.82	735.47	1021.41	90.14	0.00
PERS Gold PPO 2 Party	1,651.22	1,829.64	1,470.95	2,042.82	180.27	0.00
PERS Gold PPO Family	2,146.59	2,378.53	1,912.23	2,655.67	234.36	0.00
UNITED HEALTHCARE SignatureValue Alliance HMO						
United Healthcare Sig Value Alliance 1 Party	1,044.07	1,091.13	735.47	1021.41	308.6	79.68
United Healthcare Sig Value Alliance 2 Party	2,088.14	2,182.26	1,470.95	2,042.82	617.19	159.36
United Healthcare Sig Value Alliance Family	2,714.58	2,836.94	1,912.23	2,655.67	802.35	207.17

<p>Even for the plans available in Contra Costa County, it is your responsibility to contact your Physician / Medical provider to be sure the plan you choose is available to you.</p> <p>Some plans may not be available in every city within the county.</p> <p>As you consider your health plan choices, you should determine which health plans are available in the ZIP Code in which you are enrolling. In general, if you are an active employee or a working CalPERS retiree, you may enroll in a health plan using either your residential or work ZIP Code.</p> <p>To be sure your desired medical plan and your Primary Care Physician (PCP) are available in your county, go to the CalPERS site https://www.calpers.ca.gov/page/active-members/health-</p> <p>Be sure to review the plans in the 2024 CalPERS Health Benefit Summary on the Staff Portal of the District website under Staff Portal/Benefits or at https://mdusd.link/CalPERS2024BenefitsSummary</p> <p><i>*The 2024 CalPERS Rate minus the 2024 District Contribution x 8 months coverage (January through August) divided by 7 monthly deductions (end of December through end of June) is what you pay beginning with your end of December paycheck.</i></p>						