

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 10 Month Employees

MEDICAL PLANS	CaPERS 2023 RATES	CaPERS 2024 RATES	2023 MDUSD Coverage Rate	2024 MDUSD Coverage Rate based on yearly increase/negotiations	10 MONTH EMPLOYEES	
					2023 Deductions Remain the Same through end of November 2023 paycheck	*2024 Deductions: End of December 2023 through end of June 2024 paycheck for Jan. to Sept. 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	151.01
Anthem Select HMO 2 Party	2,257.66	2,277.72	1,470.95	2,042.82	786.71	302.01
Anthem Select HMO Family	2,934.96	2,961.04	1,912.23	2,655.67	1022.73	392.62
Anthem Traditional HMO 1 Party	1,210.71	1,339.70	735.47	1021.41	475.24	409.23
Anthem Traditional HMO 2 Party	2,421.42	2,679.40	1,470.95	2,042.82	950.47	818.46
Anthem Traditional HMO Family	3,147.85	3,483.22	1,912.23	2,655.67	1,235.62	1,063.99
BLUE SHIELD - Two (2) HMO Plans						
Access + HMO 1 Party	1,035.21	1,076.84	735.47	1021.41	299.74	71.27
Access + HMO 2 Party	2,070.42	2,153.68	1,470.95	2,042.82	599.47	142.53
Access + HMO Family	2,691.55	2,799.78	1,912.23	2,655.67	779.32	185.28
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	376.53
PERS Platinum PPO 2 Party	2,400.24	2,628.54	1,470.95	2,042.82	929.29	753.07
PERS Platinum PPO Family	3,120.31	3,417.10	1,912.23	2,655.67	1,208.08	978.98
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	89.64
United Healthcare Sig Value Alliance 2 Party	2,088.14	2,182.26	1,470.95	2,042.82	617.19	179.28
United Healthcare Sig Value Alliance Family	2,714.58	2,836.94	1,912.23	2,655.67	802.35	233.06

<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.</p> <p>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 9 months coverage (January through September) 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>						