

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

## 2024 Teamster/CST/MDSPA Medical Rates and Deductions for 12 Month Employees

MEDICAL PLANS	CaIPERS 2023 RATES	CaIPERS 2024 RATES	2023 MDUSD Coverage Rate	2024 MDUSD Coverage Rate based on yearly increase/negotiations	12 MONTH EMPLOYEES	
					2023 Deductions: September to end of November 2023 paycheck	*2024 Deductions end of December 2023 through end of November 2024 paycheck
<b>ANTHEM BLUE CROSS - Two (2) HMO Plans</b>						
Anthem Select HMO 1 Party	1,128.83	1,138.86	742.33	1021.41	393.36	117.45
Anthem Select HMO 2 Party	2,257.66	2,277.72	1484.66	2,042.82	786.71	234.90
Anthem Select HMO Family	2,934.96	2,961.04	1930.06	2,655.67	1022.73	305.37
Anthem Traditional HMO 1 Party	1,210.71	1,339.70	742.33	1021.41	475.24	318.29
Anthem Traditional HMO 2 Party	2,421.42	2,679.40	1484.66	2,042.82	950.47	636.58
Anthem Traditional HMO Family	3,147.85	3,483.22	1930.06	2,655.67	1,235.62	827.55
<b>BLUE SHIELD - Two (2) HMO Plans</b>						
Access + HMO 1 Party	1,035.21	1,076.84	742.33	1021.41	299.74	55.43
Access + HMO 2 Party	2,070.42	2,153.68	1484.66	2,042.82	599.47	110.86
Access + HMO Family	2,691.55	2,799.78	1930.06	2,655.67	779.32	144.11
<b>KAISER HMO</b>						
Kaiser 1 Party	913.74	1021.41	742.33	1021.41	178.27	0.00
Kaiser 2 Party	1,827.48	2,042.82	1484.66	2,042.82	356.53	0.00
Kaiser Family	2,375.72	2,655.67	1930.06	2,655.67	463.49	0.00
<b>ANTHEM BLUE CROSS - PPO Plans</b>						
PERS Platinum PPO 1 Party	1,200.12	1,314.27	742.33	1021.41	464.65	292.86
PERS Platinum PPO 2 Party	2,400.24	2,628.54	1484.66	2,042.82	929.29	585.72
PERS Platinum PPO Family	3,120.31	3,417.10	1930.06	2,655.67	1,208.08	761.43
PERS Gold PPO 1 Party	825.61	914.82	742.33	1021.41	90.14	0.00
PERS Gold PPO 2 Party	1,651.22	1,829.64	1484.66	2,042.82	180.27	0.00
PERS Gold PPO Family	2,146.59	2,378.53	1930.06	2,655.67	234.36	0.00
<b>UNITED HEALTHCARE SignatureValue Alliance HMO</b>						
United Healthcare Sig Value Alliance 1 Party	1,044.07	1,091.13	742.33	1021.41	308.6	69.72
United Healthcare Sig Value Alliance 2 Party	2,088.14	2,182.26	1484.66	2,042.82	617.19	139.44
United Healthcare Sig Value Alliance Family	2,714.58	2,836.94	1930.06	2,655.67	802.35	181.27

<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><b>Some plans may not be available in every city within the county.</b></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 <a href="https://www.calpers.ca.gov/page/active-members/health-">https://www.calpers.ca.gov/page/active-members/health-</a> 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 <a href="https://mdusd.link/CalPERS2024BenefitsSummary">https://mdusd.link/CalPERS2024BenefitsSummary</a></p> <p><b><i>*The 2024 CalPERS Rate minus the 2023 District Contribution is what you pay beginning with your end of December paycheck.</i></b></p>						