

**Oxnard School District  
GOLD COAST RATE CHART**

**Health and Welfare Monthly Rates Effective July 1, 2023 - December 31, 2023**

**Rates pending Board approval on May 17, 2023**

<u>OSSA</u>	<u>12 Months</u>		<u>11 Months</u>	
	<u>2022-23</u>	<u>July 2023-24 (CSEBO)</u>	<u>2022-23</u>	<u>July 2023-24 (CSEBO)</u>
Medical	\$ 1,507.00	\$ 1,507.00	\$ 1,644.00	\$ 1,644.00
Employee Cont	\$ 1,208.00	\$ 575.79	\$ 741.49	\$ 628.13

**OSSA Retirees (Fully Paid by District-see contract eligibility requirements)**

	<u>2023-24</u>
Medical	\$ 1,507.00
Dental	\$ 111.33
Vision	\$ 14.88
Total	\$ 1,633.21

**Oxnard School District - Active**

**CSEBO RATE CHART**

Health and Welfare Monthly Rates Effective January 1, 2024 - December 31, 2024

		<i>New</i>				<i>New</i>				<i>New</i>			
		Anthem Indemnity IV PPO		Anthem Wellness PPO		Anthem PPO 80		Kaiser HMO \$30		Anthem HMO \$30		Anthem HMO \$30 (Select)	
		12-Month	11-Month	12-Month	11-Month	12-Month	11-Month	12-Month	11-Month	12-Month	11-Month	12-Month	11-Month
Composite	Medical	\$ 1,642.63	\$ 1,791.96	\$ 1,431.00	\$ 1,561.09	\$ 1,703.96	\$ 1,858.87	\$ 1,427.81	\$ 1,557.61	\$ 1,906.36	\$ 2,079.67	\$ 1,721.82	\$ 1,878.35
Composite	Dental	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75
Composite	Vision	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23
<b>Total Cost All Benefits</b>													
Composite		\$ 1,770.03	\$ 1,930.94	\$ 1,558.40	\$ 1,700.07	\$ 1,831.36	\$ 1,997.85	\$ 1,555.21	\$ 1,696.59	\$ 2,033.76	\$ 2,218.65	\$ 1,849.22	\$ 2,017.33
<b>District Cap</b>		\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55
<b>Employee Contribution</b>		\$ 712.61	\$ <b>777.39</b>	\$ 500.98	\$ <b>546.52</b>	\$ 773.94	\$ <b>844.30</b>	\$ 497.79	\$ <b>543.04</b>	\$ 976.34	\$ <b>1,065.10</b>	\$ 791.80	\$ <b>863.78</b>

		<i>New</i>		<i>New</i>		<i>New</i>	
		Kaiser CDHP \$1,600		Anthem CDHP PPO 90		Anthem CDHP PPO 80	
		12-Month	11-Month	12-Month	11-Month	12-Month	11-Month
Employee only	Medical	\$ 533.10	\$ 581.56	\$ 606.50	\$ 661.64	\$ 483.57	\$ 527.53
Employee+1		\$ 1,062.90	\$ 1,159.53	\$ 1,108.99	\$ 1,209.81	\$ 884.20	\$ 964.58
Family		\$ 1,502.63	\$ 1,639.23	\$ 1,520.28	\$ 1,658.49	\$ 1,212.13	\$ 1,322.32
Composite	Dental	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75
Composite	Vision	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23
<b>Total Cost All Benefits</b>							
Employee only		\$ 660.50	\$ 720.55	\$ 733.90	\$ 800.62	\$ 610.97	\$ 666.51
Employee+1		\$ 1,190.30	\$ 1,298.51	\$ 1,236.39	\$ 1,348.79	\$ 1,011.60	\$ 1,103.56
Family		\$ 1,630.03	\$ 1,778.21	\$ 1,647.68	\$ 1,797.47	\$ 1,339.53	\$ 1,461.31
<b>District Cap</b>		\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55
<b>Employee Contribution</b>							
Employee only		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Employee+1		\$ 132.88	\$ <b>144.96</b>	\$ 178.97	\$ <b>195.24</b>	\$ -	\$ -
Family		\$ 572.61	\$ <b>624.67</b>	\$ 590.26	\$ <b>643.92</b>	\$ 282.11	\$ <b>307.76</b>

**Oxnard School District - Retirees**

**CSEBO RATE CHART**

Health and Welfare Monthly Rates Effective January 1, 2024 - December 31, 2024

		<i>New</i>				<i>New</i>				<i>New</i>			
		Anthem Indemnity IV PPO		Anthem Wellness PPO		Anthem PPO 80		Kaiser HMO \$30		Anthem HMO \$30		Anthem HMO \$30 (Select)	
		12-Month	11-Month	12-Month	11-Month	12-Month	11-Month	12-Month	11-Month	12-Month	11-Month	12-Month	11-Month
Composite	Medical	\$ 1,642.63	\$ 1,791.96	\$ 1,431.00	\$ 1,561.09	\$ 1,703.96	\$ 1,858.87	\$ 1,427.81	\$ 1,557.61	\$ 1,906.36	\$ 2,079.67	\$ 1,721.82	\$ 1,878.35
Composite	Dental	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75
Composite	Vision	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23
<b>Total Cost All Benefits</b>													
Composite		\$ 1,770.03	\$ 1,930.94	\$ 1,558.40	\$ 1,700.07	\$ 1,831.36	\$ 1,997.85	\$ 1,555.21	\$ 1,696.59	\$ 2,033.76	\$ 2,218.65	\$ 1,849.22	\$ 2,017.33
<b>District Cap</b>		\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55
<b>Employee Contribution</b>		\$ 712.61	\$ 777.39	\$ 500.98	\$ 546.52	\$ 773.94	\$ 844.30	\$ 497.79	\$ 543.04	\$ 976.34	\$ 1,065.10	\$ 791.80	\$ 863.78

		<i>New</i>		<i>New</i>		<i>New</i>	
		Kaiser CDHP \$1,600		Anthem CDHP PPO 90		Anthem CDHP PPO 80	
		12-Month	11-Month	12-Month	11-Month	12-Month	11-Month
Composite	Medical	\$ 1,131.15	\$ 1,233.98	\$ 1,181.41	\$ 1,288.81	\$ 941.95	\$ 1,027.58
Composite	Dental	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75	\$ 112.52	\$ 122.75
Composite	Vision	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23	\$ 14.88	\$ 16.23
<b>Total Cost All Benefits</b>		\$ 1,258.55	\$ 1,372.96	\$ 1,308.81	\$ 1,427.79	\$ 1,069.35	\$ 1,166.56
<b>District Cap</b>		\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55	\$1,057.42	\$ 1,153.55
<b>Employee Contribution</b>		\$ 201.13	\$ 219.41	\$ 251.39	\$ 274.24	\$ 11.93	\$ 13.01