



**TEMPLE CITY UNIFIED SCHOOL DISTRICT**  
**2025 Benefit Premiums**

**Region 2:** Fresno, Imperial, Inyo, Kern, Kings, Madera, Orange, San Diego, San Luis Obispo, Santa Barbara, Tulare, Ventura

TCUSD Annual Contribution goes towards Medical (Section A), Dental (Section B), Vision (Section C) & Life Insurance (Section D).

**2025 TCUSD District Contribution Amounts**

**TCEA:** \$9,750.00

**CSEA 105:** \$9,500.00

**CSEA 823:** \$9,750.00

**Management:** \$9,750.00

**SECTION A: MEDICAL (If you live outside of Region 2, please contact HR for rates in your region.)**

**Region 2:** Fresno, Imperial, Inyo, Kern, Kings, Madera, Orange, San Diego, San Luis Obispo, Santa Barbara, Tulare, Ventura

CALPERS MEDICAL	EMPLOYEE ONLY		EMPLOYEE AND ONE DEPENDENT **		EMPLOYEE AND 2+ DEPENDENTS **	
	TENTHLY	ANNUAL	TENTHLY	ANNUAL	TENTHLY	ANNUAL
PERS Gold PPO	1,037.70	10,377.00	2,075.40	20,754.00	2,698.02	26,980.20
PERS Platinum PPO	1,510.51	15,105.12	3,021.02	30,210.24	3,927.34	39,273.36
Anthem Blue Cross Select HMO	1,102.80	11,028.00	2,205.60	22,056.00	2,867.28	28,672.80
Anthem Blue Cross Traditional HMO	1,333.16	13,331.64	2,666.33	26,663.28	3,466.22	34,662.24
Blue Shield Access+ HMO	1,138.24	11,382.36	2,276.47	22,764.72	2,959.42	29,594.16
Blue Shield Trio HMO	1,090.92	10,909.20	2,181.84	21,818.40	2,836.39	28,363.92
Health Net Salud y Más	988.19	9,881.88	1,976.38	19,763.76	2,569.28	25,692.84
Kaiser Permanente	1,133.21	11,332.08	2,266.42	22,664.16	2,946.34	29,463.36
UnitedHealthcare Alliance	1,068.79	10,687.92	2,137.58	21,375.84	2,778.86	27,788.64
UnitedHealthcare Harmony	983.57	9,835.68	1,967.14	19,671.36	2,557.27	25,572.72
Sharp Performance Plus4	1,0421.14	10,421.40	2,084.28	20,842.28	2,709.56	27,095.64

THE ABOVE MEDICAL RATES DO NOT REFLECT THE ADMINISTRATIVE FEE FROM CALPERS

Dependent children are eligible for Medical coverage through the end of the month that dependent turns 26 years of age.

**SECTION B: DENTAL**

DENTAL	TENTHLY	ANNUAL
Delta Dental PPO – Employee and Family Dependent children are eligible for coverage through the end of the month they turn 26 years of age.	125.54	1,255.40
Delta Care DHMO – Employee and Family Selected Dentist FACILITY # _____ Dependent children are eligible for coverage through the end of the month they turn 26 years of age.	40.71	407.10

**SECTION C: VISION**

VISION PLANS	TENTHLY	ANNUAL
VSP - Employee Only	18.080	180.80
VSP - 2 or more Dependent children are eligible for coverage through the end of the month they turn 26 years of age.	39.55	395.50

**SECTION D: LIFE INSURANCE**

UNUM Employee BASIC LIFE and AD&D INSURANCE	TENTHLY	ANNUAL
Employee working at least 15 hours per week is insured at - \$50,000 (Level Term)	5.70	57.00
Employee working less than 15 hours per week is insured at - \$10,000 (Level Term)	1.14	11.40
UNUM Dependent BASIC LIFE and AD&D INSURANCE	TENTHLY	ANNUAL
To Add Dependent Life and AD&D Insurance you must also select Employee Basic Life and AD&D Insurance Coverage Spouse is covered at \$5,000; Dependent Children aged 15 days to 6 months at \$1,000; aged 6 months to 26 years old at \$5,000 Indicate number of Dependents _____	0.72	7.20