



Enterprise Elementary School District

2025-2026 Insurance Plans and Costs

(Admin, Conf, C/M Retirees after 7.1.23)

All changes must be submitted via <https://mycvf.cvtrust.org/> by September 30th, changes will be effective October 1st.

To see your health benefits plan cost, find the column that matches your status and combine the amount of all plan selections.

Should you have any questions please contact:
Raina Cable at rcable@eesd.net 530-224-4100

Monthly Health and Welfare Costs

Plan	Employee Only	Employee + One	Employee + Family	Dental	Vision	Life
3B	\$ 1,088.00	\$ 2,520.00	\$ 3,415.00	\$ 131.44	\$ 25.75	\$ 5.55
5V	\$ 912.00	\$ 2,217.00	\$ 3,032.00	\$ 131.44	\$ 25.75	\$ 5.55
8B	\$ 710.00	\$ 1,869.00	\$ 2,594.00	\$ 131.44	\$ 25.75	\$ 5.55
9V	\$ 463.00	\$ 1,444.00	\$ 2,058.00	\$ 131.44	\$ 25.75	\$ 5.55
HDHP 1	\$ 238.00	\$ 1,057.00	\$ 1,569.00	\$ 131.44	\$ 25.75	\$ 5.55
HDHP 3	\$ -	\$ 567.00	\$ 952.00	\$ 131.44	\$ 25.75	\$ 5.55
Bronze	\$ 24.00	\$ 666.00	\$ 1,082.00	\$ 131.44	\$ 25.75	\$ 5.55