

**SAN DIEGO COUNTY OFFICE OF EDUCATION
EMPLOYEE PREMIUM SHARE OF COST
2026 PLAN YEAR**

10 & 11 PAY EMPLOYEES

Medical Plan

Employee Monthly Premium

Kaiser Permanente
(All tiers)

\$259.56

United Healthcare Performance HMO

Employee Only

\$259.56

Employee + 1

\$259.56

Employee + Family

\$1089.17

United Healthcare Alliance HMO

Employee Only

\$259.56

Employee + 1

\$259.56

Employee + Family

\$958.37

United Healthcare Harmony HMO

Employee Only

\$259.56

Employee + 1

\$259.56

Employee + Family

\$737.57

United Healthcare Journey HMO

Employee Only

\$259.56

Employee + 1

\$259.56

Employee + Family

\$419.57

Surest PPO 5000 (A United Healthcare Company)

Employee Only

\$259.56

Employee + 1

\$480.77

Employee + Family

\$1579.97

SIMNSA HMO

Employee Only

\$259.56

Employee + 1

\$259.56

Employee + Family

\$259.56