

SEIU BARGAINING UNIT

2025/2026 COST OF HEALTH BENEFITS

SEIU Employees Working 5 hrs per day

Kaiser High Plan Package 1	Total Monthly Medical Premium	SCOE Pays	12 month Share of Cost	9 month Share of Costs
EE only	1,179.00	626.34	552.66	736.88
EE + 1 Dep	2,489.00	1,322.28	1,166.72	1,555.63
EE + 2/more	3,456.00	1,836.00	1,620.00	2,160.00
Kaiser High Plan Package 2	Total Monthly Medical Premium	SCOE Pays	12 month Share of Cost	9 month Share of Costs
EE only	1,153.00	626.34	526.66	702.21
EE + 1 Dep	2,435.00	1,322.28	1,112.72	1,483.63
EE + 2/more	3,379.00	1,836.00	1,543.00	2,057.33
Kaiser MID Option Plan	Total Monthly Medical Premium	SCOE Pays	12 month Share of Cost	9 month Share of Costs
EE only	998.00	626.34	371.66	495.54
EE + 1 Dep	2,106.00	1,322.28	783.72	1,044.96
EE + 2/more	2,925.00	1,836.00	1,089.00	1,452.00
Kaiser High Deductible with HSA (No SCOE funding for the HSA account as of 10-1-2011)	Total Monthly Medical Premium	SCOE Pays	12 month Share of Cost	9 month Share of Costs
EE only	736.00	626.34	109.66	146.21
EE + 1 Dep	1,553.00	1,322.28	230.72	307.63
EE + 2/more	2,157.00	1,836.00	321.00	428.00
Blue Shield 100% Plan B	Total Monthly Medical Premium	SCOE Pays	12 month Share of Cost	9 month Share of Costs
EE only	1,115.00	626.34	488.66	651.54
EE+1 Dep	2,372.00	1,322.28	1,049.72	1,399.63
EE+2/more	3,303.00	1,836.00	1,467.00	1,956.00
Blue Shield 90% Plan E	Total Monthly Medical Premium	SCOE Pays	12 month Share of Cost	9 month Share of Costs
EE only	1,021.00	626.34	394.66	526.21
EE+1 Dep	2,164.00	1,322.28	841.72	1,122.29
EE+2/more	3,010.00	1,836.00	1,174.00	1,565.33
Blue Shield 80% Plan G	Total Monthly Medical Premium	SCOE Pays	12 month Share of Cost	9 month Share of Costs
EE only	903.00	626.34	276.66	368.88
EE+1 Dep	1,911.00	1,322.28	588.72	784.96
EE+2/more	2,659.00	1,836.00	823.00	1,097.33
Blue Shield 2-Tier HSA \$5,000 (Formerly known as Blue Shield 2-Tier Anchor Bronze)	Total Monthly Medical Premium	SCOE Pays	12 month Share of Cost	9 month Share of Costs
EE only	616.00	616.00	0.00	0.00
EE+1 Child	1,273.00	1,273.00	0.00	0.00
EE+2/Children	1,273.00	1,273.00	0.00	0.00
Blue Shield WABE	Total Monthly Medical Premium	SCOE Pays	12 month Share of Cost	9 month Share of Costs
"OPT OUT"	616.00	616.00	0.00	0.00

Payroll deduction for 10 or 11 month employees share of monthly premium cost will begin on the September payroll and end on the May payroll; in other words SEIU employee share of premiums for 12 months of coverage is taken as a payroll deduction in 9 months.