

San Ysidro School District - 2027 Classified Tentative Rates All Plans w/ \$12,260

December 2026 Payment For January's Coverage

Plan + Dental one party coverage	Monthly Payroll Deduction	Monthly Employer Contribution	2027 Medical Plan Monthly Cost
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Kaiser 10 -100 Day

Single + Metlife	10.37	1,012.63	1,023.00
Single + Delta	11.96	1,011.04	1,023.00
Dual + Metlife	180.44	1,837.56	2,018.00
Dual + Delta	182.04	1,835.96	2,018.00
Family + Metlife	321.46	2,521.54	2,843.00
Family + Delta	323.05	2,519.95	2,843.00

VEBA Direct

Single + Metlife	16.01	1,039.99	1,056.00
Single + Delta	17.60	1,038.40	1,056.00
Dual + Metlife	178.17	1,911.83	2,090.00
Dual + Delta	179.81	1,910.19	2,090.00
Family + Metlife	336.57	2,596.43	2,933.00
Family + Delta	338.44	2,594.56	2,933.00

SIMNSA

Single + Metlife	0.00	323.00	323.00
Single + Delta	0.00	323.00	323.00
Dual + Metlife	0.00	528.00	528.00
Dual + Delta	0.00	528.00	528.00
Family + Metlife	0.00	825.00	825.00
Family + Delta	0.00	825.00	825.00

Dental Cost	Delta Dental PPO	MetLife Dental HMO
Single	No Cost	No Cost (\$38.46)
Two party	\$44.89	No Cost (\$38.46)
Family	\$89.77	No Cost (\$38.46)

Plan + Dental one party coverage	Monthly Payroll Deduction	Monthly Employer Contribution	2027 Medical Plan Monthly Cost
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Harmony \$10 Sharp

Single + Metlife	11.72	1,019.28	1,031.00
Single + Delta	13.33	1,017.67	1,031.00
Dual + Metlife	180.81	1,840.19	2,021.00
Dual + Delta	182.55	1,838.45	2,021.00
Family + Metlife	319.92	2,514.08	2,834.00
Family + Delta	321.52	2,512.48	2,834.00

Alliance \$20/\$30 UCSD/Scipps/Mercy/Childrens

Single + Metlife	37.20	1,138.80	1,176.00
Single + Delta	38.85	1,137.15	1,176.00
Dual + Metlife	227.53	1,941.47	2,169.00
Dual + Delta	229.46	1,939.54	2,169.00
Family + Metlife	416.81	2,621.19	3,038.00
Family + Delta	418.95	2,619.05	3,038.00

Journey Harmony Sharp \$1,000/\$1,600/\$2,200

Single + Metlife	0.00	936.00	936.00
Single + Delta	0.00	936.00	936.00
Dual + Metlife	153.81	1,636.19	1,790.00
Dual + Delta	155.68	1,634.32	1,790.00
Family + Metlife	305.87	2,196.13	2,502.00
Family + Delta	307.99	2,194.01	2,502.00

*** Please note, these are estimated rates based on current enrollments. Final rates will vary depending on plan selections during open enrollment.**