By Bargaining Unit FOR EMPLOYEES HIRED AFTER 07/01/2003

SPPA, SUSU, CSEA 821, CSEA 318, Board Members, Operating Engineers, & Police

STA, USA, Management, Confidential *

Retired on or after Feb 1, 2017 SPPA, USA ****

Tier	Plan / Premium	SUSD Reimbursement to Retiree. **	Employer Share ***	Retiree Cost	Tier	Plan / Premium	SUSD Reimbursement to Retiree. **	Employer Share ***	Retiree Cost	Tier	Plan / Premium	SUSD Reimbursement to Retiree.	Employer Share ***	Retiree Cost	
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	Blue Shield Access +					Blue Shield Access +					Blue Shield Access +				
Single	\$1,076.84	\$587.44	\$ 117.75	\$371.65	Single	\$1,076.84	\$587.44	\$ 117.75	\$371.65	Single	\$1,076.84	\$ 689.48	\$ 117.75	\$269.61	
Plus 1	\$2,153.68	\$587.44	\$ 117.75	\$1,448.49	Plus 1	\$2,153.68	\$1,197.88	\$ 117.75	\$838.05	Plus 1	\$2,153.68	\$ 689.48	\$ 117.75	\$1,346.45	
Family	\$2,799.78	\$587.44	\$ 117.75	\$2,094.59	Family	\$2,799.78	\$1,564.14	\$ 117.75	\$1,117.89	Family	\$2,799.78	\$ 689.48	\$ 117.75	\$1,992.55	
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	Blue Shield EPO					Blue Shield EPO					Blue Shield EPO				
Single	\$1,076.84	\$587.44	\$ 117.75	\$371.65	Single	\$1,076.84	\$587.44	\$ 117.75	\$371.65	Single	\$1,076.84	\$ 689.48	\$ 117.75	\$269.61	
Plus 1	\$2,153.68	\$587.44	\$ 117.75	\$1,448.49	Plus 1	\$2,153.68	\$1,197.88	\$ 117.75	\$838.05	Plus 1	\$2,153.68	\$ 689.48	\$ 117.75	\$1,346.45	
Family	\$2,799.78	\$587.44	\$ 117.75	\$2,094.59	Family	\$2,799.78	\$1,564.14	\$ 117.75	\$1,117.89	Family	\$2,799.78	\$ 689.48	\$ 117.75	\$1,992.55	
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	Blue Shield Trio					Blue Shield Trio					Blue Shield Trio				
Single	\$946.84	\$587.44	\$ 117.75	\$241.65	Single	\$946.84	\$587.44	\$ 117.75	\$241.65	Single	\$946.84	\$ 689.48	\$ 117.75	\$139.61	
Plus 1	\$1,893.68	\$587.44	\$ 117.75	\$1,188.49	Plus 1	\$1,893.68	\$1,197.88	\$ 117.75	\$578.05	Plus 1	\$1,893.68	\$ 689.48	\$ 117.75	\$1,086.45	
Family	\$2,461.78	\$587.44	\$ 117.75	\$1,756.59	Family	\$2,461.78	\$1,564.14		\$779.89	Family	\$2,461.78		\$ 117.75	\$1,654.55	
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	Kaiser CA					Kaiser CA					Kaiser CA				
Single	\$1,021.41	\$587.44	\$ 117.75	\$316.22	Single	\$1,021.41	\$587.44	\$ 117.75	\$316.22	Single	\$1,021.41	\$ 689.48	\$ 117.75	\$214.18	
Plus 1	\$2,042.82	\$587.44	\$ 117.75	\$1,337.63	Plus 1	\$2,042.82	\$1,197.88	\$ 117.75	\$727.19	Plus 1	\$2,042.82	\$ 689.48	\$ 117.75	\$1,235.59	
Family	\$2,655.67	\$587.44	\$ 117.75	\$1,950.48	Family	\$2,655.67	\$1,564.14	\$ 117.75	\$973.78	Family	\$2,655.67	\$ 689.48	\$ 117.75	\$1,848.44	
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	PORAC - Police Only					PORAC-Police Only					PORAC-Police Only				
Single	\$931.00	\$587.44	\$ 117.75	\$225.81	Single	\$931.00	\$587.44	\$ 117.75	\$225.81	Single	\$931.00	\$ 689.48	\$ 117.75	\$123.77	
Plus 1	\$2,117.00	\$587.44	\$ 117.75	\$1,411.81	Plus 1	\$2,117.00	\$1,197.88	\$ 117.75	\$801.37	Plus 1	\$2,117.00	\$ 689.48	\$ 117.75	\$1,309.77	
Family	\$2,651.00	\$587.44	\$ 117.75	\$1,945.81	Family	\$2,651.00	\$1,564.14	\$ 117.75	\$969.11	Family	\$2,651.00	\$ 689.48	\$ 117.75	\$1,843.77	
	PERS Gold					PERS Gold					PERS Gold				
Single	\$914.82	\$587.44	\$ 117.75	\$209.63	Single	\$914.82	\$587.44	\$ 117.75	\$209.63	Single	\$914.82	\$ 689.48	\$ 117.75	\$107.59	
Plus 1	\$1,829.64	\$587.44	\$ 117.75	\$1,124.45	Plus 1	\$1,829.64	\$1,197.88	\$ 117.75	\$514.01	Plus 1	\$1,829.64	\$ 689.48	\$ 117.75	\$1,022.41	
Family	\$2,378.53	\$587.44	\$ 117.75	\$1,673.34	Family	\$2,378.53	\$1,564.14	\$ 117.75	\$696.64	Family	\$2,378.53	\$ 689.48	\$ 117.75	\$1,571.30	
	PERS Platinum					PERS Platinum					PERS Platinum				
Single	\$1,314.27	\$587.44	\$ 117.75	\$609.08	Single	\$1,314.27	\$587.44	\$ 117.75	\$609.08	Single	\$1,314.27	\$ 689.48	\$ 117.75	\$507.04	
Plus 1	\$2,628.54	\$587.44	\$ 117.75	\$1,923.35	Plus 1	\$2,628.54	\$1,197.88	\$ 117.75	\$1,312.91	Plus 1	\$2,628.54	\$ 689.48	\$ 117.75	\$1,821.31	
Family	\$3,417.10	\$587.44	\$ 117.75	\$2,711.91	Family	\$3,417.10	\$1,564.14	\$ 117.75	\$1,735.21	Family	\$3,417.10	\$ 689.48	\$ 117.75	\$2,609.87	
0: 1	Anthem HMO Select \$1,138.86	0507.44	\$ 117.75	0.400.07	0: 1	Anthem HMO Select	0507.44	\$ 117.75	A400.07	0: 1	Anthem HMO Select	000.40	A 117.75	2004.00	
Single Plus 1	\$1,138.86 \$2,277.72	\$587.44 \$587.44	\$ 117.75 \$ 117.75	\$433.67 \$1,572.53	Single Plus 1	\$1,138.86 \$2,277.72	\$587.44 \$1,197.88	\$ 117.75 \$ 117.75	\$433.67 \$962.09	Single Plus 1	\$1,138.86 \$2,277.72	\$ 689.48 \$ 689.48	\$ 117.75 \$ 117.75	\$331.63 \$1,470.49	
Family	\$2,961.04	\$587.44	\$ 117.75	\$2,255.85	Family	\$2,961.04		\$ 117.75	\$1,279.15	Family	\$2,961.04		\$ 117.75	\$2,153.81	
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	Anthem HMO Traditional					Anthem HMO Traditional					Anthem HMO Traditional				
Single	\$1,339.70	\$587.44	\$ 117.75	\$634.51	Single	\$1,339.70	\$587.44	\$ 117.75	\$634.51	Single	\$1,339.70	\$ 689.48	\$ 117.75	\$532.47	
Plus 1	\$2,679.40	\$587.44	\$ 117.75	\$1,974.21	Plus 1	\$2,679.40	\$1,197.88	\$ 117.75	\$1,363.77	Plus 1	\$2,679.40	\$ 689.48	\$ 117.75	\$1,872.17	
Family	\$3,483.22	\$587.44	\$ 117.75	\$2,778.03	Family	\$3,483.22	\$1,564.14	\$ 117.75	\$1,801.33	Family	\$3,483.22	\$ 689.48	\$ 117.75	\$2,675.99	
	Anthem EPO Del Norte					Anthem EPO Del Norte		·			Anthem EPO Del Norte		·		
Single	\$1,314.27	\$587.44	\$ 117.75	\$609.08	Single	\$1,314.27	\$587.44	\$ 117.75	\$609.08	Single	\$1,314.27	\$ 689.48	\$ 117.75	\$507.04	
Plus 1	\$2,628.54	\$587.44	\$ 117.75	\$1,923.35	Plus 1	\$2,628.54	\$1,197.88	\$ 117.75	\$1,312.91	Plus 1	\$2,628.54	\$ 689.48	\$ 117.75	\$1,821.31	
Family	\$3,417.10	\$587.44	\$ 117.75	\$2,711.91	Family	\$3,417.10	\$1,564.14	\$ 117.75	\$1,735.21	Family	\$3,417.10	\$ 689.48	\$ 117.75	\$2,609.87	
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	United Health Care					United Health Care					United Health Care				
Single	\$1,091.13	\$587.44	\$ 117.75	\$385.94	Single	\$1,091.13	\$587.44	\$ 117.75	\$385.94	Single	\$1,091.13	\$ 689.48	\$ 117.75	\$283.90	
Plus 1	\$2,182.26	\$587.44	\$ 117.75	\$1,477.07	Plus 1	\$2,182.26	\$1,197.88	\$ 117.75	\$866.63	Plus 1	\$2,182.26	\$ 689.48	\$ 117.75	\$1,375.03	
Family	\$2,836.94	\$587.44	\$ 117.75	\$2,131.75	Family	\$2,836.94	\$1,564.14	\$ 117.75	\$1,155.05	Family	\$2,836.94	\$ 689.48	\$ 117.75	\$2,029.71	
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	Western Health Advantage	1				Western Health Advantage					Western Health Advantage				
Single	\$807.23	\$587.44	\$ 117.75	\$102.04	Single	\$807.23	\$587.44	\$ 117.75	\$102.04	Single	\$807.23	\$ 689.48	\$ 117.75	\$0.00	
Plus 1	\$1,614.46	\$587.44	\$ 117.75	\$909.27	Plus 1	\$1,614.46	\$1,197.88	\$ 117.75	\$298.83	Plus 1	\$1,614.46	\$ 689.48	\$ 117.75	\$807.23	
Family	\$2,098.80	\$587.44	\$ 117.75	\$1,393.61	Family	\$2,098.80	\$1,564.14	\$ 117.75	\$416.91	Family	\$2,098.80	\$ 689.48	\$ 117.75	\$1,291.57	

^{*} The following groups have negotiated dependent medical coverage for early retirees.

^{**} SUSD cost is the least expensive HMO premium for early retirees hired after 07/01/2003 using the 2012 CalPERS Health Premium HMO costs.

^{***} Employer Share of \$117.75 is paid directly to CalPERS in accordance with the CalPERS enrollment rules for school districts participating in the health benefits program

^{****} The following groups have negotiated single medical coverage for employees retiring on or after Feb 1, 2017.