

HEALTH PLAN CONTRIBUTION RATES

For employees in bargaining units

CA, CC & MA

Effective July 23, 2016

Contributions are deducted over 24 pay periods

FULL TIME 64+ HOURS (PER PAY PERIOD)			
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Blue Shield PPO \$1300 ABHP	\$441.63	\$796.23	\$1,106.99
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$449.83	\$812.63	\$1,131.60
Employer	\$292.39	\$528.21	\$735.54
Employee	\$157.44	\$284.42	\$396.06
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Blue Shield PPO \$200	\$574.63	\$1,035.73	\$1,439.49
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$582.83	\$1,052.13	\$1,464.10
Employer	\$378.84	\$683.88	\$951.67
Employee	\$203.99	\$368.25	\$512.44
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Kaiser HMO	\$307.75	\$615.50	\$870.94
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$315.95	\$631.90	\$895.55
Employer	\$205.37	\$410.74	\$582.11
Employee	\$110.58	\$221.17	\$313.44
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Kaiser HMO \$1300 ABHP	\$253.35	\$506.70	\$716.97
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$261.55	\$523.10	\$741.58
Employer	\$170.01	\$340.02	\$482.03
Employee	\$91.54	\$183.09	\$259.55
<i>NOTE: Employees receive \$6,000 over 24 pay periods in Optional Benefit credits, which can be used to offset employee contributions. (24 pay periods at \$250 each)</i>			

THESE RATES DO NOT INCLUDE THE RATES FOR THE MANDATORY

HEALTH PLAN CONTRIBUTION RATES

For employees in bargaining units

CA, CC & MA

Effective July 23, 2016

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PART TIME 40 - 63 HOURS (PER PAY PERIOD)			
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Blue Shield PPO \$1300 ABHP	\$441.63	\$796.23	\$1,106.99
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$449.83	\$812.63	\$1,131.60
Employer	\$219.29	\$396.16	\$551.66
Employee	\$230.54	\$416.47	\$579.95
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Blue Shield PPO \$200	\$574.63	\$1,035.73	\$1,439.49
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$582.83	\$1,052.13	\$1,464.10
Employer	\$284.13	\$512.91	\$713.75
Employee	\$298.70	\$539.22	\$750.35
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Kaiser HMO	\$307.75	\$615.50	\$870.94
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$315.95	\$631.90	\$895.55
Employer	\$154.03	\$308.05	\$436.58
Employee	\$161.92	\$323.85	\$458.97
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Kaiser HMO \$1300 ABHP	\$253.35	\$506.70	\$716.97
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$261.55	\$523.10	\$741.58
Employer	\$127.51	\$255.01	\$361.52
Employee	\$134.04	\$268.09	\$380.06

NOTE: Employees receive \$4,500 over 24 pay periods in Optional Benefit credits, which can be used to offset employee contributions. (24 pay periods at \$188 each)

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HEALTH PLAN CONTRIBUTION RATES

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PART TIME 32 - 39 HOURS (PER PAY PERIOD)			
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Blue Shield PPO \$1300 ABHP	\$441.63	\$796.23	\$1,106.99
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$449.83	\$812.63	\$1,131.60
Employer	\$146.19	\$264.10	\$367.77
Employee	\$303.64	\$548.53	\$763.83
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Blue Shield PPO \$200	\$574.63	\$1,035.73	\$1,439.49
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$582.83	\$1,052.13	\$1,464.10
Employer	\$189.42	\$341.94	\$475.83
Employee	\$393.41	\$710.19	\$988.27
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Kaiser HMO	\$307.75	\$615.50	\$870.94
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$315.95	\$631.90	\$895.55
Employer	\$102.68	\$205.37	\$291.05
Employee	\$213.27	\$426.53	\$604.50
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Kaiser HMO \$1300 ABHP	\$253.35	\$506.70	\$716.97
EDC Admin Fee	\$8.20	\$16.40	\$24.61
Total	\$261.55	\$523.10	\$741.58
Employer	\$85.00	\$170.01	\$241.01
Employee	\$176.55	\$353.09	\$500.57
<i>NOTE: Employees receive \$3,000 over 24 pay periods in Optional Benefit credits, which can be used to offset employee contributions. (24 pay periods at \$125 each)</i>			

THESE RATES DO NOT INCLUDE THE RATES FOR THE MANDATORY