

HEALTH PLAN CONTRIBUTION RATES

For employees in bargaining units

SA

Effective January 1, 2017

Contributions are deducted over 24 pay periods

	FULL TIME 64+ HOURS		
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
Blue Shield PPO \$1300 ABHP	\$441.98	\$796.88	\$1,107.92
EDC Admin Fee	\$9.49	\$18.98	\$28.47
Total	\$451.47	\$815.86	\$1,136.39
Employer	\$293.46	\$530.31	\$738.66
Employee	\$158.01	\$285.55	\$397.73
Blue Shield PPO \$200	\$574.98	\$1,036.38	\$1,440.42
EDC Admin Fee	\$9.49	\$18.98	\$28.47
Total	\$584.47	\$1,055.36	\$1,468.89
Employer	\$379.91	\$685.99	\$954.78
Employee	\$204.56	\$369.37	\$514.11
Kaiser HMO	\$320.92	\$634.17	\$894.17
EDC Admin Fee	\$9.49	\$18.98	\$28.47
Total	\$330.41	\$653.15	\$922.64
Employer	\$214.77	\$424.55	\$599.72
Employee	\$115.64	\$228.60	\$322.92
Kaiser HMO \$1300 ABHP	\$263.49	\$519.35	\$731.72
EDC Admin Fee	\$9.49	\$18.98	\$28.47
Total	\$272.98	\$538.33	\$760.19
Employer	\$177.44	\$349.92	\$494.13
Employee	\$95.54	\$188.41	\$266.06

NOTE: Employees receive \$4,108 over 24 pay periods in Optional Benefit credits, which can be used to offset employee contributions. (24 pay periods at \$171.17 each)

THESE RATES DO NOT INCLUDE THE RATES FOR THE MANDATORY VISION AND DENTAL PLANS.