

HEALTH PLAN CONTRIBUTION RATES

For employees in bargaining units

SA

Effective January 1, 2018

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 ABHP LOW	\$448.23	\$807.85	\$1,123.09
EDC Admin Fee	\$8.70	\$17.41	\$26.12
Total	\$456.93	\$825.26	\$1,149.21
Employer	\$297.01	\$536.42	\$746.99
Employee	\$159.92	\$288.84	\$402.22
BLUE SHIELD PPO STANDARD	\$582.73	\$1,050.35	\$1,460.09
EDC Admin Fee	\$8.70	\$17.41	\$26.12
Total	\$591.43	\$1,067.76	\$1,486.21
Employer	\$384.43	\$694.05	\$966.04
Employee	\$207.00	\$373.71	\$520.17
KAISER HMO STANDARD	\$340.00	\$672.00	\$947.50
EDC Admin Fee	\$8.70	\$17.41	\$26.12
Total	\$348.70	\$689.41	\$973.62
Employer	\$226.66	\$448.12	\$632.86
Employee	\$122.04	\$241.29	\$340.76
KAISER HMO ABHP	\$279.50	\$550.50	\$775.50
EDC Admin Fee	\$8.70	\$17.41	\$26.12
Total	\$288.20	\$567.91	\$801.62
Employer	\$187.33	\$369.15	\$521.06
Employee	\$100.87	\$198.76	\$280.56
	<i>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)</i>		

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