

RATES EFFECTIVE OCTOBER 1, 2020

COVERAGE	EMPLOYEE SHARE	EMPLOYER SHARE	TOTAL PREMIUM
1.0 FTE MANAGEMENT & CLASSIFIED			
12-MONTH			
Kaiser HMO - Single	\$ 0.00	\$ 714.00	\$ 714.00
Kaiser HMO - Double	\$ 0.00	\$ 1,489.00	\$ 1,489.00
Kaiser HMO - Family	\$ 0.00	\$ 2,066.00	\$ 2,066.00
Kaiser HSA - Single	\$ 0.00	\$ 563.00	\$ 563.00
Kaiser HSA - Double	\$ 0.00	\$ 1,172.00	\$ 1,172.00
Kaiser HSA - Family	\$ 0.00	\$ 1,626.00	\$ 1,626.00
Blue Shield HSA - Single	\$ 0.00	\$ 618.00	\$ 618.00
Blue Shield HSA - Double	\$ 0.00	\$ 1,350.00	\$ 1,350.00
Blue Shield HSA - Family	\$ 0.00	\$ 1,898.00	\$ 1,898.00
Blue Shield HMO - Single	\$ 68.00	\$ 714.00	\$ 782.00
Blue Shield HMO - Double	\$ 169.00	\$ 1,489.00	\$ 1,658.00
Blue Shield HMO - Family	\$ 244.00	\$ 2,066.00	\$ 2,310.00
Blue Shield PPO - Single	\$ 161.00	\$ 714.00	\$ 875.00
Blue Shield PPO - Double	\$ 374.00	\$ 1,489.00	\$ 1,863.00
Blue Shield PPO - Family	\$ 532.00	\$ 2,066.00	\$ 2,598.00
SRJC Dental	\$ 0.00	\$ 123.00	\$ 123.00
Vision Service Plan – Single	\$ 0.00	\$ 8.72	\$ 8.72
Vision Service Plan - Family	\$ 12.90	\$ 8.72	\$ 21.62
CONTRACT FACULTY			
10-MONTH			
Kaiser HMO - Single	\$ 0.00	\$ 856.80	\$ 856.80
Kaiser HMO - Double	\$ 0.00	\$ 1,786.80	\$ 1,786.80
Kaiser HMO - Family	\$ 0.00	\$ 2,479.20	\$ 2,479.20
Kaiser HSA - Single	\$ 0.00	\$ 675.60	\$ 675.60
Kaiser HSA - Double	\$ 0.00	\$ 1,406.40	\$ 1,406.40
Kaiser HSA - Family	\$ 0.00	\$ 1,951.20	\$ 1,951.20
Blue Shield HSA - Single	\$ 0.00	\$ 741.60	\$ 741.60
Blue Shield HSA - Double	\$ 0.00	\$ 1,620.00	\$ 1,620.00
Blue Shield HSA - Family	\$ 0.00	\$ 2,277.60	\$ 2,277.60
Blue Shield HMO - Single	\$ 81.60	\$ 856.80	\$ 938.40
Blue Shield HMO - Double	\$ 202.80	\$ 1,786.80	\$ 1,989.60
Blue Shield HMO - Family	\$ 292.80	\$ 2,479.20	\$ 2,772.00
Blue Shield PPO - Single	\$ 193.20	\$ 856.80	\$ 1,050.00
Blue Shield PPO - Double	\$ 448.80	\$ 1,786.80	\$ 2,235.60
Blue Shield PPO - Family	\$ 638.40	\$ 2,479.20	\$ 3,117.60
SRJC Dental	\$ 0.00	\$ 147.60	\$ 147.60
Vision Service Plan – Single	\$ 0.00	\$ 10.46	\$ 10.46
Vision Service Plan - Family	\$ 15.48	\$ 10.46	\$ 25.94