

Office of Human Resources

Benefits Office



Faculty Monthly Premium Rates Fiscal Year July 1, 2023 - June 30, 2024

	Monthly	District Contribution	Faculty Contribution	Annual Faculty
	Premium	12 months	10 months	Contribution
Kaiser Permanente \$5 High HMO	\$	\$		
Employee only	936.92	886.92	60.00	600.00
Employee + 1	1,873.83	1,773.63	120.00	1,200.00
Employee + 2 or more	2,810.75	2,660.75	180.00	1,800.00
Kaiser Permanente \$20 Low HMO				
Employee only	909.79	889.79	24.00	240.00
Employee + 1	1,819.57	1,779.57	48.00	480.00
Employee + 2 or more	2,729.36	2,669.36	72.00	720.00
Anthem Blue Cross High HMO				
(\$15 plan)				
Employee only	1,329.51	1,244.51	102.00	1,020.00
Employee + 1	2,657.30	2,487.30	204.00	2,040.00
Employee + 2 or more	4,387.03	4,132.03	306.00	3,060.00
Anthem Blue Cross \$30 Low HMO				
Employee only	1,272.88	1,222.88	60.00	600.00
Employee + 1	2,543.70	2,443.70	120.00	1,200.00
Employee + 2 or more	4,200.24	4,050.24	180.00	1,800.00
Anthem Blue Cross PPO				
Employee only	2,462.78	1,329.51	1,359.92	13,599.24
Employee + 1	4,926.43	2,657.30	2,722.95	27,229.56
Employee + 2 or more	8,128.48	4,387.03	4,489.74	44,897.40
Delta Dental - Standard				
Employee only	62.88	62.88	0.00	0.00
Employee + 1	125.77	125.77	0.00	0.00
Employee + 2 or more	185.51	185.51	0.00	0.00
Delta Dental - Enhanced				
Employee only	77.93	62.88	18.06	180.60
Employee + 1	155.86	125.77	36.11	361.08
Employee + 2 or more	229.89	185.51	53.26	532.56
VSP Vision				
Employee only	11.71	11.71	0.00	0.00
Employee + 1	23.41	23.41	0.00	0.00
Employee + 2 or more	35.12	35.12	0.00	0.00

Rates are subject to change July 1 of each year.

Updated 04/28/2023