



**CHABOT-LAS POSITAS COMMUNITY COLLEGE DISTRICT**  
**Office of Human Resources**  
**Benefits Office**



**Faculty**  
**Monthly Premium Rates**  
**Fiscal Year July 1, 2024 - June 30, 2025**

	Monthly Premium	District Contribution 12 months	Faculty Contribution 10 months	Annual Faculty Contribution
<b>Kaiser Permanente \$5 High HMO</b>	\$	\$		
Employee only	936.92	886.92	60.00	600.00
Employee + 1	1,873.83	1,773.83	120.00	1,200.00
Employee + 2 or more	2,810.75	2,660.75	180.00	1,800.00
<b>Kaiser Permanente \$20 Low HMO</b>				
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
<b>Anthem Blue Cross High HMO (\$15 plan)</b>				
Employee only	1,382.69	1,297.69	102.00	1,020.00
Employee + 1	2,763.59	2,593.59	204.00	2,040.00
Employee + 2 or more	4,562.51	4,307.51	306.00	3,060.00
<b>Anthem Blue Cross \$30 Low HMO</b>				
Employee only	1,323.80	1,273.80	60.00	600.00
Employee + 1	2,645.45	2,545.45	120.00	1,200.00
Employee + 2 or more	4,368.25	4,218.25	180.00	1,800.00
<b>Anthem Blue Cross PPO</b>				
Employee only	2,561.29	1,382.69	1,414.32	14,143.20
Employee + 1	5,123.48	2,763.59	2,831.87	28,318.68
Employee + 2 or more	8,453.61	4,562.51	4,669.32	46,693.20
<b>Delta Dental - Standard</b>				
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
<b>Delta Dental - Enhanced</b>				
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
<b>VSP Vision</b>				
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 04/22/2024