



CERTIFICATED EMPLOYEES HEALTH INSURANCE PREMIUMS

RATES EFFECTIVE: JANUARY 2012 – DECEMBER 2012

LOS ANGELES AREAS

HMO		10thly RATES	EMPLOYEE CONTRIBUTION
BLUE SHIELD NET VALUE			
	Plan Code		
Employee Only	0621	\$527.10	\$0
Employee & 1 Dependent	0622	\$1,054.20	\$498.25
Employee & 2+ Dependents	0623	\$1,370.46	\$814.51
KAISER			
	Plan Code		
Employee Only	3061	\$558.76	\$2.81
Employee & 1 Dependent	3062	\$1,117.51	\$561.56
Employee & 2+ Dependents	3063	\$1,452.77	\$896.82
BLUE SHIELD ACCESS			
	Plan Code		
Employee Only	3021	\$612.86	\$56.91
Employee & 1 Dependent	3022	\$1,225.73	\$669.78
Employee & 2+ Dependents	3023	\$1,593.44	\$1,037.49

PPO AND INDEMNITY PLANS		10thly RATES	EMPLOYEE CONTRIBUTION
PERS SELECT			
	Plan Code		
Employee Only	0801	\$515.06	\$0
Employee & 1 Dependent	0802	\$1,030.13	\$474.18
Employee & 2+ Dependents	0803	\$1,339.16	\$783.21
PERS CHOICE			
	Plan Code		
Employee Only	3211	\$606.76	\$50.81
Employee & 1 Dependent	3212	\$1,213.51	\$657.56
Employee & 2+ Dependents	3213	\$1,577.57	\$1,021.62
PERS CARE			
	Plan Code		
Employee Only	3261	\$1,087.67	\$531.72
Employee & 1 Dependent	3262	\$2,175.34	\$1,619.39
Employee & 2+ Dependents	3263	\$2,827.93	\$2,271.98

DENTAL/VISION/LIFE		10thly RATES	EMPLOYEE CONTRIBUTION
Delta Dental			
Employee Only		\$69.37	\$0
Employee & 1 Dependent		\$117.95	\$48.58
Employee & 2+ Dependents		\$181.30	\$111.93
VSP – VISION			
Employee Only		\$9.48	\$0
Employee & 1 Dependent		\$13.73	\$4.25
Employee & 2+ Dependents		\$24.63	\$15.15
Prudential Life			
Employee		\$10.20	\$0

- Notes: 1) Certificated employee contributions will be deducted 10 times per year
 2) Plan year effective: January 1, 2012 – December 31, 2012
 3) District annual contribution per certificated employee: \$6,450



CERTIFICATED EMPLOYEES HEALTH INSURANCE PREMIUMS

RATES EFFECTIVE: JANUARY 2012 – DECEMBER 2012

OTHER SOUTHERN CALIFORNIA AREAS (Imperial, Orange, Riverside and San Diego Counties)

HMO		10thly RATES	EMPLOYEE CONTRIBUTION
BLUE SHIELD NET VALUE - SOUTH			
	Plan Code		
Employee Only	641	\$602.32	\$46.37
Employee & 1 Dependent	642	\$1,204.63	\$648.68
Employee & 2+ Dependents	643	\$1,566.02	\$1,010.07
KAISER - SOUTH			
	Plan Code		D
Employee Only	3081	\$615.31	\$59.36
Employee & 1 Dependent	3082	\$1,230.62	\$674.67
Employee & 2+ Dependents	3083	\$1,599.82	\$1,043.87
BLUE SHIELD ACCESS - SOUTH			
	Plan Code		D
Employee Only	3041	\$700.32	\$144.37
Employee & 1 Dependent	3042	\$1,400.64	\$844.69
Employee & 2+ Dependents	3043	\$1,820.83	\$1,264.88

PPO AND INDEMNITY PLANS		10thly RATES	EMPLOYEE CONTRIBUTION
PERS SELECT - SOUTH			
	Plan Code		
Employee Only	821	\$536.02	\$0
Employee & 1 Dependent	822	\$1,072.03	\$516.08
Employee & 2+ Dependents	823	\$1,393.64	\$837.69
PERSCHOICE - SOUTH			
	Plan Code		D
Employee Only	3231	\$631.43	\$75.48
Employee & 1 Dependent	3232	\$1,262.86	\$706.91
Employee & 2+ Dependents	3233	\$1,641.71	\$1,085.76
PERS CARE - SOUTH			
	Plan Code		D
Employee Only	3281	\$1,131.91	\$575.96
Employee & 1 Dependent	3282	\$2,263.82	\$1,707.87
Employee & 2+ Dependents	3283	\$2,942.98	\$2,387.03

OTHER		10thly RATES	EMPLOYEE CONTRIBUTION
Delta Dental			
Employee Only		\$69.37	\$0
Employee & 1 Dependent		\$117.95	\$48.58
Employee & 2+ Dependents		\$181.30	\$111.93
VSP – VISION			
Employee Only		\$9.48	\$0
Employee & 1 Dependent		\$13.73	\$4.25
Employee & 2+ Dependents		\$24.63	\$15.15
Prudential Life			
Employee		\$10.20	\$0

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