



CERTIFICATED EMPLOYEES HEALTH INSURANCE PREMIUMS

RATES EFFECTIVE: JANUARY 2013 – DECEMBER 2013

LOS ANGELES AREAS

HMO		10thly RATES	EMPLOYEE CONTRIBUTION
BLUE SHIELD NET VALUE			
	Plan Code		
Employee Only	0621	\$544.02	\$0
Employee & 1 Dependent	0622	\$1,088.04	\$533.53
Employee & 2+ Dependents	0623	\$1,414.45	\$859.94
KAISER			
	Plan Code		
Employee Only	3061	\$602.88	\$48.37
Employee & 1 Dependent	3062	\$1,205.76	\$651.25
Employee & 2+ Dependents	3063	\$1,567.49	\$1,012.98
BLUE SHIELD ACCESS			
	Plan Code		
Employee Only	3021	\$636.90	\$82.39
Employee & 1 Dependent	3022	\$1,273.80	\$719.29
Employee & 2+ Dependents	3023	\$1,655.94	\$1,101.43

PPO AND INDEMNITY PLANS		10thly RATES	EMPLOYEE CONTRIBUTION
PERS SELECT			
	Plan Code		
Employee Only	0801	\$514.90	\$0
Employee & 1 Dependent	0802	\$1,029.79	\$475.28
Employee & 2+ Dependents	0803	\$1,338.73	\$784.22
PERS CHOICE			
	Plan Code	B	D
Employee Only	3211	\$704.95	\$150.44
Employee & 1 Dependent	3212	\$1,409.90	\$855.39
Employee & 2+ Dependents	3213	\$1,832.88	\$1,278.37
PERS CARE			
	Plan Code	B	D
Employee Only	3261	\$1,144.68	\$590.17
Employee & 1 Dependent	3262	\$2,289.36	\$1,734.85
Employee & 2+ Dependents	3263	\$2,976.17	\$2,421.66

DENTAL/VISION/LIFE	10thly RATES	EMPLOYEE CONTRIBUTION
Delta Dental		
Employee Only	\$70.81	\$0.00
Employee & 1 Dependent	\$120.40	\$49.59
Employee & 2+ Dependents	\$185.07	\$114.26
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, 2013 – December 31, 2013
 3) District annual contribution per certificated employee: \$6,450



CERTIFICATED EMPLOYEES HEALTH INSURANCE PREMIUMS

RATES EFFECTIVE: JANUARY 2013 – DECEMBER 2013

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	\$660.04	\$105.53
Employee & 1 Dependent	642	\$1,320.07	\$765.56
Employee & 2+ Dependents	643	\$1,716.10	\$1,161.59
KAISER - SOUTH			
	Plan Code		
Employee Only	3081	\$670.74	\$116.23
Employee & 1 Dependent	3082	\$1,341.48	\$786.97
Employee & 2+ Dependents	3083	\$1,743.92	\$1,189.41
BLUE SHIELD ACCESS - SOUTH			
	Plan Code		
Employee Only	3041	\$772.72	\$218.21
Employee & 1 Dependent	3042	\$1,545.43	\$990.92
Employee & 2+ Dependents	3043	\$2,009.06	\$1,454.55

PPO AND INDEMNITY PLANS		10thly RATES	EMPLOYEE CONTRIBUTION
PERS SELECT - SOUTH			
	Plan Code		
Employee Only	821	\$535.79	\$0
Employee & 1 Dependent	822	\$1,071.58	\$517.07
Employee & 2+ Dependents	823	\$1,393.04	\$838.53
PERSCHOICE - SOUTH			
	Plan Code		
Employee Only	3231	\$733.56	\$179.05
Employee & 1 Dependent	3232	\$1,467.12	\$912.61
Employee & 2+ Dependents	3233	\$1,907.26	\$1,352.75
PERS CARE - SOUTH			
	Plan Code		
Employee Only	3281	\$1,191.13	\$636.62
Employee & 1 Dependent	3282	\$2,382.26	\$1,827.75
Employee & 2+ Dependents	3283	\$3,096.95	\$2,542.44

OTHER		10thly RATES	EMPLOYEE CONTRIBUTION
Delta Dental			
Employee Only		\$70.81	\$0
Employee & 1 Dependent		\$120.40	\$49.59
Employee & 2+ Dependents		\$185.07	\$114.26
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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