



**CV EMPLOYEES HEALTH INSURANCE PREMIUMS**  
**RATES EFFECTIVE: JULY 2014 – DECEMBER 2014**  
**LOS ANGELES AREAS**

<b>HMO</b>		<b>10thly RATES</b>	<b>EMPLOYEE CONTRIBUTION</b>
<b>BLUE SHIELD NET VALUE</b>			
	Plan Code		
Employee Only	0621	\$474.60	\$0
Employee & 1 Dependent	0622	\$949.20	\$39.69
Employee & 2+ Dependents	0623	\$1,233.96	\$324.45
<b>KAISER</b>			
	Plan Code		
Employee Only	3061	\$650.15	\$0
Employee & 1 Dependent	3062	\$1,300.30	\$390.79
Employee & 2+ Dependents	3063	\$1,690.38	\$780.87
<b>BLUE SHIELD ACCESS</b>			
	Plan Code		
Employee Only	3021	\$563.89	\$0
Employee & 1 Dependent	3022	\$1,127.78	\$218.27
Employee & 2+ Dependents	3023	\$1,466.12	\$556.61

<b>PPO AND INDEMNITY PLANS</b>		<b>10thly RATES</b>	<b>EMPLOYEE CONTRIBUTION</b>
<b>PERS SELECT</b>			
	Plan Code		
Employee Only	0801	\$688.60	\$0
Employee & 1 Dependent	0802	\$1,377.19	\$467.68
Employee & 2+ Dependents	0803	\$1,790.35	\$880.84
<b>PERS CHOICE</b>			
	Plan Code		
Employee Only	3211	\$719.03	\$0
Employee & 1 Dependent	3212	\$1,438.06	\$528.55
Employee & 2+ Dependents	3213	\$1,869.47	\$959.96
<b>PERS CARE</b>			
	Plan Code		
Employee Only	3261	\$749.51	\$0
Employee & 1 Dependent	3262	\$1,499.02	\$589.51
Employee & 2+ Dependents	3263	\$1,948.72	\$1,039.21

<b>DENTAL/VISION/LIFE</b>	<b>10thly RATES</b>	<b>EMPLOYEE CONTRIBUTION</b>
<b>Delta Dental</b>		
Employee Only	\$70.81	\$0
Employee & 1 Dependent	\$120.40	\$49.59
Employee & 2+ Dependents	\$185.08	\$114.27
<b>VSP – VISION</b>		
Employee Only	\$9.48	\$0
Employee & 1 Dependent	\$13.73	\$4.25
Employee & 2+ Dependents	\$24.64	\$15.16
<b>Prudential Life</b>		
Employee	\$10.20	\$0

- Notes: 1) CV employee contributions will be deducted 10 times per year  
 2) Plan year effective: July 1, 2014 – December 31, 2014  
 3) District annual contribution per employee: \$10,000



## CV EMPLOYEES HEALTH INSURANCE PREMIUMS RATES EFFECTIVE: JULY 2014 – DECEMBER 2014

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

HMO		10thly RATES	EMPLOYEE CONTRIBUTION
<b>BLUE SHIELD NET VALUE - SOUTH</b>			
	Plan Code		
Employee Only	0641	\$548.60	\$0
Employee & 1 Dependent	0642	\$1,097.21	\$187.70
Employee & 2+ Dependents	0643	\$1,426.37	\$516.86
<b>KAISER - SOUTH</b>			
	Plan Code		
Employee Only	3081	\$723.35	\$0
Employee & 1 Dependent	3082	\$1,446.70	\$537.19
Employee & 2+ Dependents	3083	\$1,880.70	\$971.19
<b>BLUE SHIELD ACCESS - SOUTH</b>			
	Plan Code		
Employee Only	3041	\$651.85	\$0
Employee & 1 Dependent	3042	\$1,303.70	\$394.19
Employee & 2+ Dependents	3043	\$1,694.82	\$785.31

PPO AND INDEMNITY PLANS		10thly RATES	EMPLOYEE CONTRIBUTION
<b>PERS SELECT - SOUTH</b>			
	Plan Code		
Employee Only	0821	\$703.58	\$0
Employee & 1 Dependent	0822	\$1,407.17	\$497.66
Employee & 2+ Dependents	0823	\$1,829.32	\$919.81
<b>PERSCHOICE - SOUTH</b>			
	Plan Code		
Employee Only	3231	\$734.70	\$0
Employee & 1 Dependent	3232	\$1,469.40	\$559.89
Employee & 2+ Dependents	3233	\$1,910.22	\$1,000.71
<b>PERS CARE - SOUTH</b>			
	Plan Code		
Employee Only	3281	\$765.86	\$0
Employee & 1 Dependent	3282	\$1,531.73	\$622.22
Employee & 2+ Dependents	3283	\$1,991.24	\$1,081.73

OTHER		10thly RATES	EMPLOYEE CONTRIBUTION
<b>Delta Dental</b>			
Employee Only		\$70.81	\$0
Employee & 1 Dependent		\$120.40	\$49.59
Employee & 2+ Dependents		\$185.07	\$114.27
<b>VSP – VISION</b>			
Employee Only		\$9.48	\$0
Employee & 1 Dependent		\$13.73	\$4.25
Employee & 2+ Dependents		\$24.63	\$15.16
<b>Prudential Life</b>			
Employee		\$10.20	\$0

- Notes: 1) CV employee contributions will be deducted 10 times per year  
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