

**MANHATTAN BEACH UNIFIED SCHOOL DISTRICT  
2017-18 Insurance Rates**

	<b>Total Premium</b>	<b>District Share</b>	<b>Full Time Employee Share</b>
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**Anthem Blue Cross Premier Select HMO**

<i>Single</i>	\$ 689.18	\$ 551.34	\$ 137.84
<i>2-Party</i>	\$ 1,447.30	\$ 1,157.84	\$ 289.46
<i>Family</i>	\$ 2,067.56	\$ 1,654.05	\$ 413.51

**Anthem Blue Cross Premier Vivity HMO**

<i>Single</i>	\$ 712.16	\$ 551.34	\$ 160.82
<i>2-Party</i>	\$ 1,495.56	\$ 1,157.84	\$ 337.72
<i>Family</i>	\$ 2,136.50	\$ 1,654.05	\$ 482.45

**Anthem Blue Cross Custom Premier PPO**

<i>Single</i>	\$ 1,304.78	\$ 551.34	\$ 753.44
<i>2-Party</i>	\$ 2,740.06	\$ 1,157.84	\$ 1,582.22
<i>Family</i>	\$ 3,914.35	\$ 1,654.05	\$ 2,260.30

**Anthem Blue Cross Custom Classic PPO**

<i>Single</i>	\$ 1,072.43	\$ 551.34	\$ 521.09
<i>2-Party</i>	\$ 2,252.11	\$ 1,157.84	\$ 1,094.27
<i>Family</i>	\$ 3,217.30	\$ 1,654.05	\$ 1,563.25

**Kaiser Permanente HMO (\$0 Copay Option)**

<i>Single</i>	\$ 693.14	\$ 551.34	\$ 141.80
<i>2-Party</i>	\$ 1,386.29	\$ 1,157.84	\$ 228.45
<i>Family</i>	\$ 1,961.60	\$ 1,654.05	\$ 307.55

**Kaiser Permanente HMO (\$15 Copay Option)**

<i>Single</i>	\$ 628.30	\$ 551.34	\$ 76.96
<i>2-Party</i>	\$ 1,256.60	\$ 1,157.84	\$ 98.76
<i>Family</i>	\$ 1,778.09	\$ 1,654.05	\$ 124.04

**Delta Dental Plan**

<i>Single</i>	\$ 85.43	\$ 68.34	\$ 17.09
<i>2-Party</i>	\$ 145.25	\$ 116.20	\$ 29.05
<i>Family</i>	\$ 222.12	\$ 177.70	\$ 44.42

**Vision Service Plan**

<i>Single</i>	\$ 11.96	\$ 9.57	\$ 2.39
<i>2-Party</i>	\$ 23.90	\$ 19.12	\$ 4.78
<i>Family</i>	\$ 38.48	\$ 30.78	\$ 7.70

LIFE INSURANCE	DISTRICT PAID - must work minimum 50% time
LONG TERM DISABILITY	DISTRICT PAID - must work minimum 50% time

**MANHATTAN BEACH UNIFIED SCHOOL DISTRICT  
EMPLOYEE HEALTH & WELFARE PREMIUM RATES  
2017-18**

Employee's share is based on 50% time pay

	Employee Contribution per MONTH		
	1 PARTY	2 PARTY	Family (3/more)
Anthem BCP Select HMO	413.51	868.38	1240.54
Anthem BCP Vivity HMO	436.49	916.64	1309.48
Anthem BCC Premier PPO	1029.11	2161.14	3087.33
Anthem BCC Classic PPO	796.76	1673.19	2390.28
Kaiser HMO (\$0 Copay)	417.47	807.37	1134.58
Kaiser HMO (\$15 Copay)	352.63	677.68	951.07
DELTA DENTAL PLAN	51.26	87.15	133.27
VISION SERVICE PLAN	7.18	14.34	23.09
LIFE INSURANCE	DISTRICT PAID-must work minimum 50% time		
LONG TERM DISABILITY	DISTRICT PAID-must work minimum 50% time		

revised 7/20/2017

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**MANHATTAN BEACH UNIFIED SCHOOL DISTRICT  
EMPLOYEE HEALTH & WELFARE PREMIUM RATES  
2016-17**

Employee's share is based on 60% time .

	Employee Contribution per MONTH		
	1 PARTY	2 PARTY	Family (3/more)
Anthem BCP Select HMO	322.92	678.14	968.77
Anthem BCP Vivity HMO	343.63	721.62	1030.89
Anthem BCC Premier PPO	877.61	1842.99	2632.84
Anthem BCC Classic PPO	668.25	1403.33	2004.75
Kaiser HMO (\$0 Copay)	427.26	824.71	1158.48
Kaiser HMO (\$15 Copay)	359.41	689.00	966.45
DELTA DENTAL PLAN	46.76	79.50	121.58
VISION SERVICE PLAN	6.62	12.43	20.01
LIFE INSURANCE	DISTRICT PAID-must work minimum 50% time		
LONG TERM DISABILITY	DISTRICT PAID-must work minimum 50% time		

revised 8/3/16

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**MANHATTAN BEACH UNIFIED SCHOOL DISTRICT  
EMPLOYEE HEALTH & WELFARE PREMIUM RATES  
2017-18**

Employee's share is based on 75% time (6 hrs).

	Employee Contribution per MONTH		
	1 PARTY	2 PARTY	Family (3/more)
Anthem BCP Select HMO	275.67	578.92	827.02
Anthem BCP Vivity HMO	269.11	565.12	807.32
Anthem BCC Premier PPO	803.09	1686.49	2409.27
Anthem BCC Classic PPO	593.73	1246.83	1781.18
Kaiser HMO (\$0 Copay)	352.74	668.21	934.91
Kaiser HMO (\$15 Copay)	284.89	532.50	742.88
DELTA DENTAL PLAN	35.97	61.16	93.52
VISION SERVICE PLAN	4.78	9.56	15.40
LIFE INSURANCE	DISTRICT PAID-must work minimum 50% time		
LONG TERM DISABILITY	DISTRICT PAID-must work minimum 50% time		

revised 7/20/17

**MANHATTAN BEACH UNIFIED SCHOOL DISTRICT  
EMPLOYEE HEALTH & WELFARE PREMIUM RATES  
2017-18**

Employee's share is based on 80% time pay

	Employee Contribution per MONTH		
	1 PARTY	2 PARTY	Family (3/more)
Anthem BCP Select HMO	248.10	521.03	744.32
Anthem BCP Vivity HMO	271.08	569.29	813.26
Anthem BCC Premier PPO	863.70	1813.79	2591.11
Anthem BCC Classic PPO	631.35	1813.79	2591.11
Kaiser HMO (\$0 Copay)	252.06	460.02	638.36
Kaiser HMO (\$15 Copay)	187.22	330.33	454.85
DELTA DENTAL PLAN	30.75	52.29	79.96
VISION SERVICE PLAN	4.30	8.60	13.86
LIFE INSURANCE	DISTRICT PAID-must work minimum 50% time		
LONG TERM DISABILITY	DISTRICT PAID-must work minimum 50% time		

revised 7/20/2017

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**MANHATTAN BEACH UNIFIED SCHOOL DISTRICT  
EMPLOYEE HEALTH & WELFARE PREMIUM RATES  
2017-18**

Employee's share is based on 40.625% time (3.25 hrs).  
The Annual premium is divided by nineteen to get a per paycheck amount.  
The first deduction will come from your paycheck issued September 25th.

	Employee Contribution per PAYCHECK		
	1 PARTY	2 PARTY	Family (3/more)
<b>Anthem BCP Select HMO</b>	<b>228.52</b>	<b>479.90</b>	<b>685.56</b>
<b>Anthem BCP Vivity HMO</b>	<b>256.93</b>	<b>539.58</b>	<b>770.81</b>
<b>Anthem BCC Premier PPO</b>	<b>568.84</b>	<b>1194.57</b>	<b>1706.52</b>
<b>Anthem BCC Classic PPO</b>	<b>446.55</b>	<b>937.76</b>	<b>1339.66</b>
<b>Kaiser HMO (\$0 Copay)</b>	<b>246.92</b>	<b>482.07</b>	<b>678.76</b>
<b>Kaiser HMO (\$15 Copay)</b>	<b>212.79</b>	<b>413.81</b>	<b>660.64</b>
<b>DELTA DENTAL PLAN</b>	<b>30.35</b>	<b>51.60</b>	<b>78.91</b>
<b>VISION SERVICE PLAN</b>	<b>4.25</b>	<b>8.49</b>	<b>13.67</b>
<b>LIFE INSURANCE</b>	<b>DISTRICT PAID-must work minimum 50% time</b>		
<b>LONG TERM DISABILITY</b>	<b>DISTRICT PAID-must work minimum 50% time</b>		

revised 7/20/17

**MANHATTAN BEACH UNIFIED SCHOOL DISTRICT  
EMPLOYEE HEALTH & WELFARE PREMIUM RATES  
2017-18**

Employee's share is based on 50% time (4 hrs).  
The Annual premium is divided by nineteen to get a per paycheck amount.  
The first deduction will come from your paycheck issued September 25th.

	Employee Contribution per PAYCHECK		
	1 PARTY	2 PARTY	Family (3/more)
Anthem BCP Select HMO	217.64	457.05	652.92
Anthem BCP Vivity HMO	229.73	482.45	689.20
Anthem BCC Premier PPO	541.64	1137.44	1624.91
Anthem BCC Classic PPO	419.35	880.63	1258.05
Kaiser HMO (\$0 Copay)	219.72	424.94	597.15
Kaiser HMO (\$15 Copay)	185.59	356.68	500.57
DELTA DENTAL PLAN	26.98	45.87	70.15
VISION SERVICE PLAN	3.78	7.55	12.15
LIFE INSURANCE	DISTRICT PAID-must work minimum 50% time		
LONG TERM DISABILITY	DISTRICT PAID-must work minimum 50% time		

revised 7/20/2017

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**MANHATTAN BEACH UNIFIED SCHOOL DISTRICT  
EMPLOYEE HEALTH & WELFARE PREMIUM RATES  
2017-18**

Employee's share is based on 75% time (6 hrs).  
The Annual premium is divided by nineteen to get a per paycheck amount.  
The first deduction will come from your paycheck issued September 25th.

	Employee Contribution per PAYCHECK		
	1 PARTY	2 PARTY	Family (3/more)
Anthem BCP Select HMO	145.09	304.70	435.28
Anthem BCP Vivity HMO	157.19	330.10	471.56
Anthem BCC Premier PPO	469.09	985.09	1407.27
Anthem BCC Classic PPO	346.81	728.28	1040.41
Kaiser HMO (\$0 Copay)	147.18	272.59	379.51
Kaiser HMO (\$15 Copay)	113.05	204.33	282.93
DELTA DENTAL PLAN	17.98	30.58	46.76
VISION SERVICE PLAN	2.52	5.03	8.10
LIFE INSURANCE	DISTRICT PAID-must work minimum 50% time		
LONG TERM DISABILITY	DISTRICT PAID-must work minimum 50% time		

revised 7/11/16



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**MANHATTAN BEACH UNIFIED SCHOOL DISTRICT  
EMPLOYEE HEALTH & WELFARE PREMIUM RATES  
2017-18**

**Employee's share is based on 81.25% time (6.5 hrs).  
The Annual premium is divided by nineteen to get a per paycheck amount.  
The first deduction will come from your paycheck issued September 25th.**

	<b>Employee Contribution per PAYCHECK</b>		
	<b>1 PARTY</b>	<b>2 PARTY</b>	<b>Family (3/more)</b>
<b>Anthem BCP Select HMO</b>	<b>126.96</b>	<b>266.61</b>	<b>380.87</b>
<b>Anthem BCP Vivity HMO</b>	<b>139.05</b>	<b>292.01</b>	<b>417.15</b>
<b>Anthem BCC Premier PPO</b>	<b>450.96</b>	<b>947.01</b>	<b>1352.86</b>
<b>Anthem BCC Classic PPO</b>	<b>328.67</b>	<b>690.19</b>	<b>986.00</b>
<b>Kaiser HMO (\$0 Copay)</b>	<b>129.04</b>	<b>234.50</b>	<b>325.10</b>
<b>Kaiser HMO (\$15 Copay)</b>	<b>94.91</b>	<b>166.24</b>	<b>228.52</b>
<b>DELTA DENTAL PLAN</b>	<b>15.74</b>	<b>26.76</b>	<b>40.92</b>
<b>VISION SERVICE PLAN</b>	<b>2.21</b>	<b>4.40</b>	<b>7.09</b>
<b>LIFE INSURANCE</b>	<b>DISTRICT PAID-must work minimum 50% time</b>		
<b>LONG TERM DISABILITY</b>	<b>DISTRICT PAID-must work minimum 50% time</b>		

revised 7/20/17