2015-2016
Manhattan Beach Unifed School Distrct
Health Insurance Costs

ALL RATES ARE FIGURED AS 10THLY

	TENTHLY PREMIUM	DISTRICT SHARE	EMPLOYEE SHARE**
UHC PPO - Opt #1 (8CA)			
Employee Only	1,437.89	625.59	812.30
Employee + One	2,875.78	1,251.16	1,624.62
Family (3 or more)	3,738.47	1,720.44	2,018.03
UHC PPO - Opt #2 (8CN)			
Employee Only	1,285.25	625.59	659.66
Employee + One	2,570.52	1,251.16	1,319.36
Family (3 or more)	3,341.65	1,720.44	1,621.21
United HealthCare HMO (HTX)			
Employee Only	781.99	625.59	156.40
Employee + One	1,563.95	1,251.16	312.79
Family (3 or more)	2,150.55	1,720.44	430.11
Kaiser Permanente (KTX)			
Employee Only	703.18	625.59	77.59
Employee + One	1,406.36	1,251.16	155.20
Family (3 or more)	1,990.00	1,720.44	269.56
Delta Dental Plan (DDP)			
Employee Only	97.75	78.20	19.55
Employee + One	166.18	132.94	33.24
Family (3 or more)	254.14	203.81	50.83
Vision Service Plan (VSP)			
Employee Only	18.03	14.42	3.61
Employee + One	26.15	20.92	5.23
Family (3 or more)	46.91	37.53	9.38

**Note: Employee share is based on full time employement - 10thly pay
Any employment less than 100% will result in a prorated amount in district share

Life Insurance & Long-Term Disability are District paid for those who are employed 50% or more.