

**MEDICAL, DENTAL, Vision Care INSURANCE COSTS**

**Rates effective January 1, 2024 through December 31, 2024**

\*Payroll deductions occur the month prior to premium payments (i.e. December deduction for January premium)

**Certificated - 10 Monthly Deductions**

*Those employed initially for LESS THAN 50% are not eligible for medical programs.*

\*District maximum contribution is \$3,213.02

FTE	PROGRAM	Annual Premium	10 Monthly Premiums	District Pays	Employee Pays
1.0000	Kaiser HMO	\$ 23,458.20	\$ 2,345.82	\$ 2,345.82	\$ -
	Cigna HMO	\$ 32,130.20	\$ 3,213.02	\$ 3,213.02	\$ -
	Cigna POS	\$ 41,242.50	\$ 4,124.25	\$ 3,213.02	\$ 911.23
	Cigna HSA	\$ 24,851.40	\$ 2,485.14	\$ 2,485.14	\$ -
	Kaiser HMO High Deductible	\$ 17,243.40	\$ 1,724.34	\$ 1,724.34	\$ -
	Kaiser HSA	\$ 20,525.90	\$ 2,052.59	\$ 2,052.59	\$ -
	Dental Plan	\$ 1,900.00	\$ 190.00	\$ 190.00	\$ -
Effective 12/1/23	Vision Care	\$ 308.90	\$ 30.89	\$ 30.89	\$ -
0.8000	Kaiser HMO			\$ 1,876.66	\$ 469.16
	Cigna HMO			\$ 2,570.42	\$ 642.60
	Cigna POS			\$ 2,570.42	\$ 1,553.83
	Cigna HSA			\$ 1,988.11	\$ 497.03
	Kaiser HMO High Deductible			\$ 1,379.47	\$ 344.87
	Kaiser HSA			\$ 1,642.07	\$ 410.52
	Dental Plan			\$ 152.00	\$ 38.00
Effective 12/1/23	Vision Care			\$ 24.71	\$ 6.18
0.7500	Kaiser HMO			\$ 1,759.37	\$ 586.46
	Cigna HMO			\$ 2,409.77	\$ 803.26
	Cigna POS			\$ 2,409.77	\$ 1,714.49
	Cigna HSA			\$ 1,863.86	\$ 621.29
	Kaiser HMO High Deductible			\$ 1,293.26	\$ 431.09
	Kaiser HSA			\$ 1,539.44	\$ 513.15
	Dental Plan			\$ 142.50	\$ 47.50
Effective 12/1/23	Vision Care			\$ 23.17	\$ 7.72
0.6000	Kaiser HMO			\$ 1,407.49	\$ 938.33
	Cigna HMO			\$ 1,927.81	\$ 1,285.21
	Cigna POS			\$ 1,927.81	\$ 2,196.44
	Cigna HSA			\$ 1,491.08	\$ 994.06
	Kaiser HMO High Deductible			\$ 1,034.60	\$ 689.74
	Kaiser HSA			\$ 1,231.55	\$ 821.04
	Dental Plan			\$ 114.00	\$ 76.00
Effective 12/1/23	Vision Care			\$ 18.53	\$ 12.36
0.5000	Kaiser HMO			\$ 1,172.91	\$ 1,172.91
	Cigna HMO			\$ 1,606.51	\$ 1,606.51
	Cigna POS			\$ 1,606.51	\$ 2,517.74
	Cigna HSA			\$ 1,242.57	\$ 1,242.57
	Kaiser HMO High Deductible			\$ 862.17	\$ 862.17
	Kaiser HSA			\$ 1,026.30	\$ 1,026.30
	Dental Plan			\$ 95.00	\$ 95.00
Effective 12/1/23	Vision Care			\$ 15.45	\$ 15.45
If employment drops below 50%, employee may continue on dental and vision plans by paying their portion.					
0.4000	Dental Plan			\$ 76.00	\$ 114.00
Effective 12/1/23	Vision Care			\$ 12.36	\$ 18.53
0.2000	Dental Plan			\$ 38.00	\$ 152.00
Effective 12/1/23	Vision Care			\$ 6.18	\$ 24.71

NO DEDUCTIONS JUNE/JULY