

EMPLOYEE CONTRIBUTION  
2018 HEALTH CARE PREMIUM  
BASED ON DISTRICT CONTRIBUTION (80% OF 2016 KAISER PREMIUM)

District Contribution	Single Party	Employee + 1	Family (3 or more)
	<b>\$597.00</b>	<b>\$1,194.00</b>	<b>\$1,553.00</b>
<b>Anthem HMO Select Premium</b>	<b>\$856.41</b>	<b>\$1,712.82</b>	<b>\$2,226.67</b>
<b>Employee Share:</b>			
Monthly deduction based on 11 paychecks	\$282.99	\$565.99	\$734.91
Monthly deduction based on 12 paychecks	\$259.41	\$518.82	\$673.67
<b>Anthem HMO Traditional Premium</b>	<b>\$925.47</b>	<b>\$1,850.94</b>	<b>\$2,406.22</b>
<b>Employee Share:</b>			
Monthly deduction based on 11 paychecks	\$358.33	\$716.66	\$930.79
Monthly deduction based on 12 paychecks	\$328.47	\$656.94	\$853.22
<b>Western Health Advantage (NEW PLAN)</b>	<b>\$792.56</b>	<b>\$1,585.12</b>	<b>\$2,060.66</b>
<b>Employee Share:</b>			
Monthly deduction based on 11 paychecks	\$213.34	\$426.68	\$553.81
Monthly deduction based on 12 paychecks	\$195.56	\$391.12	\$507.66
<b>Blue Shield HMO Premium</b>	<b>\$889.02</b>	<b>\$1,778.04</b>	<b>\$2,311.45</b>
<b>Employee Share:</b>			
Monthly deduction based on 11 paychecks	\$318.57	\$637.13	\$827.40
Monthly deduction based on 12 paychecks	\$292.02	\$584.04	\$758.45
<b>HealthNet SmartCare HMO Premium</b>	<b>\$863.48</b>	<b>\$1,726.96</b>	<b>\$2,245.05</b>
<b>Employee Share:</b>			
Monthly deduction based on 11 paychecks	\$290.71	\$581.41	\$754.96
Monthly deduction based on 12 paychecks	\$266.48	\$532.96	\$692.05
<b>Kaiser Permanente</b>	<b>\$779.86</b>	<b>\$1,559.72</b>	<b>\$2,027.64</b>
<b>Employee Share:</b>			
Monthly deduction based on 11 paychecks	\$199.48	\$398.97	\$517.79
Monthly deduction based on 12 paychecks	\$182.86	\$365.72	\$474.64
<b>PERS Select PPO Premium</b>	<b>\$717.50</b>	<b>\$1,435.00</b>	<b>\$1,865.50</b>
<b>Employee Share:</b>			
Monthly deduction based on 11 paychecks	\$131.45	\$262.91	\$340.91
Monthly deduction based on 12 paychecks	\$120.50	\$241.00	\$312.50
<b>PERS Choice PPO Premium</b>	<b>\$800.27</b>	<b>\$1,600.54</b>	<b>\$2,080.70</b>
<b>Employee Share:</b>			
Monthly deduction based on 11 paychecks	\$221.75	\$443.50	\$575.67
Monthly deduction based on 12 paychecks	\$203.27	\$406.54	\$527.70
<b>PERS Care PPO Premium</b>	<b>\$882.45</b>	<b>\$1,764.90</b>	<b>\$2,294.37</b>
<b>Employee Share:</b>			
Monthly deduction based on 11 paychecks	\$311.40	\$622.80	\$808.77
Monthly deduction based on 12 paychecks	\$285.45	\$570.90	\$741.37
<b>Unitedhealthcare HMO Premium</b>	<b>\$1,371.84</b>	<b>\$2,743.68</b>	<b>\$3,566.78</b>
<b>Employee Share:</b>			
Monthly deduction based on 11 paychecks	\$845.28	\$1,690.56	\$2,196.85
Monthly deduction based on 12 paychecks	\$774.84	\$1,549.68	\$2,013.78

**11 Month Employees:** These rates are based on employees NOT changing health plans during open enrollment. If you change plans effective 1/1/18 your rates will vary from the rates indicated above.