

## 2025 Contributions

## Hire Date Before July 1, 2022

FTE Status	Full Time Eligible		Part Time Eligible (20-30 hours)	
Classification	Classified School Psychologists Confidential Management		Classified School Psychologists Confidential Management	
	Employee	District	Employee	District
Medical Plan	10thly Contribution	10thly Contribution	10thly Contribution	10thly Contribution
Kaiser HMO Employee Only Employee+ Child(ren) Employee + Spouse Employee + Family	\$0.00 \$35.00 \$55.00 \$70.00	\$947.64 \$1,603.59 \$2,182.41 \$2,766.22	\$0.00 \$690.95 \$1,289.77 \$1,888.58	\$947.64 \$947.64 \$947.64 \$947.64
Blue Shield Trio HMO Employee Only Employee+ Child(ren) Employee + Spouse Employee + Family	\$0.00 \$17.50 \$27.50 \$35.00	\$838.80 \$1,444.10 \$1,974.10 \$2,506.60	\$0.00 \$622.80 \$1,162.80 \$1,702.80	\$838.80 \$838.80 \$838.80 \$838.80 \$838.80
Blue Shield Access+ HMO Employee Only Employee+ Child(ren) Employee + Spouse Employee + Family	\$0.00 \$35.00 \$55.00 \$70.00	\$951.60 \$1,624.60 \$2,217.80 \$2,816.00	\$0.00 \$708.00 \$1,321.20 \$1,934.40	\$951.60 \$951.60 \$951.60 \$951.60
Blue Shield PPO Employee Only Employee+ Child(ren) Employee + Spouse Employee + Family	\$391.20 \$720.20 \$994.60 \$1,264.00	\$951.60 \$1,624.60 \$2,217.80 \$2,816.00	Not Eligible	Not Eligible

## Hire Date July 1, 2022 and After

FTE Status	Full Time Eligible		Part Time Eligible (20-30 hours)	
Classification	Classified School Psychologists Confidential Management		Classified School Psychologists Confidential Management	
	Employee	District	Employee	District
Medical Plan	10thly Contribution	10thly Contribution	10thly Contribution	10thly Contribution
Kaiser HMO Employee Only Employee+ Child(ren) Employee + Spouse Employee + Family	\$0.00 \$89.49 \$112.91 \$136.34	\$947.64 \$1,549.10 \$2,124.50 \$2,699.88	\$0.00 \$753.35 \$1,352.17 \$1,950.98	\$947.64 \$885.24 \$885.24 \$885.24
Blue Shield Trio HMO Employee Only Employee+ Child(ren) Employee + Spouse Employee + Family	\$0.00 \$0.00 \$0.00 \$0.00	\$838.80 \$1,461.60 \$2,001.60 \$2,541.60	\$0.00 \$576.36 \$1,116.36 \$1,656.36	\$838.80 \$885.24 \$885.24 \$885.24
Blue Shield Access+ HMO Employee Only Employee+ Child(ren) Employee + Spouse Employee + Family	\$0.00 \$110.50 \$148.30 \$186.12	\$951.60 \$1,549.10 \$2,124.50 \$2.699.88	\$0.00 \$774.36 \$1,387.56 \$2,000.76	\$951.60 \$885.24 \$885.24 \$885.24
Blue Shield PPO Employee Only Employee+ Child(ren) Employee + Spouse Employee + Family	\$457.56 \$795.70 \$1,087.90 \$1,380.12	\$885.24 \$1,549.10 \$2,124.50 \$2,699.88	Not Eligible	Not Eligible

## **Benefits Paid By District**

- MetLife DHMO Dental
- Delta Dental PPO (30+ Hours)
- VSP Vision
- Voya Basic Life and AD&D