

ROSEVILLE CITY SCHOOL DISTRICT
2024-2025 RATES for Percentage Employees
10 Pay (includes employees receiving summer savings)

Medical Only

		<u>Classified Employee</u>					
Plan	Tier	<u>4 hrs</u>	<u>4.5 hrs</u>	<u>5 hrs</u>	<u>5.5 hrs</u>	<u>6 hrs</u>	<u>6.5 hrs</u>
		50.00%	56.25%	62.50%	68.75%	75.00%	81.25%
WHA HMO	Emp only	\$ 626.45	\$ 576.06	\$ 525.66	\$ 475.27	\$ 424.88	\$ 374.48
	Emp + Sp	\$ 1,656.05	\$ 1,605.66	\$ 1,555.26	\$ 1,504.87	\$ 1,454.48	\$ 1,404.08
	Emp + Child	\$ 1,161.65	\$ 1,111.26	\$ 1,060.86	\$ 1,010.47	\$ 960.08	\$ 909.68
	Family	\$ 2,016.05	\$ 1,965.66	\$ 1,915.26	\$ 1,864.87	\$ 1,814.48	\$ 1,764.08
WHA DHMO	Emp only	\$ 372.05	\$ 321.66	\$ 271.26	\$ 220.87	\$ 170.48	\$ 120.08
	Emp + Sp	\$ 1,147.25	\$ 1,096.86	\$ 1,046.46	\$ 996.07	\$ 945.68	\$ 895.28
	Emp + Child	\$ 775.25	\$ 724.86	\$ 674.46	\$ 624.07	\$ 573.68	\$ 523.28
	Family	\$ 1,418.45	\$ 1,368.06	\$ 1,317.66	\$ 1,267.27	\$ 1,216.88	\$ 1,166.48
SHP HMO	Emp only	\$ 806.45	\$ 756.06	\$ 705.66	\$ 655.27	\$ 604.88	\$ 554.48
	Emp + Sp	\$ 2,016.05	\$ 1,965.66	\$ 1,915.26	\$ 1,864.87	\$ 1,814.48	\$ 1,764.08
	Emp + Child	\$ 1,435.25	\$ 1,384.86	\$ 1,334.46	\$ 1,284.07	\$ 1,233.68	\$ 1,183.28
	Family	\$ 2,440.85	\$ 2,390.46	\$ 2,340.06	\$ 2,289.67	\$ 2,239.28	\$ 2,188.88
SHP DHMO	Emp only	\$ 565.25	\$ 514.86	\$ 464.46	\$ 414.07	\$ 363.68	\$ 313.28
	Emp + Sp	\$ 1,532.45	\$ 1,482.06	\$ 1,431.66	\$ 1,381.27	\$ 1,330.88	\$ 1,280.48
	Emp + Child	\$ 1,068.05	\$ 1,017.66	\$ 967.26	\$ 916.87	\$ 866.48	\$ 816.08
	Family	\$ 1,872.05	\$ 1,821.66	\$ 1,771.26	\$ 1,720.87	\$ 1,670.48	\$ 1,620.08
Kaiser 25/10 HMO	Emp only	\$ 902.45	\$ 852.06	\$ 801.66	\$ 751.27	\$ 700.88	\$ 650.48
	Emp + Sp	\$ 2,208.05	\$ 2,157.66	\$ 2,107.26	\$ 2,056.87	\$ 2,006.48	\$ 1,956.08
	Emp + Child	\$ 1,581.65	\$ 1,531.26	\$ 1,480.86	\$ 1,430.47	\$ 1,380.08	\$ 1,329.68
	Family	\$ 2,665.25	\$ 2,614.86	\$ 2,564.46	\$ 2,514.07	\$ 2,463.68	\$ 2,413.28
Kaiser DHMO	Emp only	\$ 768.05	\$ 717.66	\$ 667.26	\$ 616.87	\$ 566.48	\$ 516.08
	Emp + Sp	\$ 1,938.05	\$ 1,887.66	\$ 1,837.26	\$ 1,786.87	\$ 1,736.48	\$ 1,686.08
	Emp + Child	\$ 1,376.45	\$ 1,326.06	\$ 1,275.66	\$ 1,225.27	\$ 1,174.88	\$ 1,124.48
	Family	\$ 2,348.45	\$ 2,298.06	\$ 2,247.66	\$ 2,197.27	\$ 2,146.88	\$ 2,096.48

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High Deductible							
WHA HD \$2,800/ \$5,600	Emp only	\$ 252.05	\$ 201.66	\$ 151.26	\$ 100.87	\$ 50.48	\$ 0.08
	Emp + Sp	\$ 903.65	\$ 853.26	\$ 802.86	\$ 752.47	\$ 702.08	\$ 651.68
	Emp + Child	\$ 591.65	\$ 541.26	\$ 490.86	\$ 440.47	\$ 390.08	\$ 339.68
	Family	\$ 1,131.65	\$ 1,081.26	\$ 1,030.86	\$ 980.47	\$ 930.08	\$ 879.68
WHA HDM \$1,800/ \$3,600	Emp only	\$ 351.65	\$ 301.26	\$ 250.86	\$ 200.47	\$ 150.08	\$ 99.68
	Emp + Sp	\$ 1,102.85	\$ 1,052.46	\$ 1,002.06	\$ 951.67	\$ 901.28	\$ 850.88
	Emp + Child	\$ 741.65	\$ 691.26	\$ 640.86	\$ 590.47	\$ 540.08	\$ 489.68
	Family	\$ 1,365.65	\$ 1,315.26	\$ 1,264.86	\$ 1,214.47	\$ 1,164.08	\$ 1,113.68
SHP HD \$2,500/ \$5,000	Emp only	\$ 399.65	\$ 349.26	\$ 298.86	\$ 248.47	\$ 198.08	\$ 147.68
	Emp + Sp	\$ 1,197.65	\$ 1,147.26	\$ 1,096.86	\$ 1,046.47	\$ 996.08	\$ 945.68
	Emp + Child	\$ 813.65	\$ 763.26	\$ 712.86	\$ 662.47	\$ 612.08	\$ 561.68
	Family	\$ 1,476.05	\$ 1,425.66	\$ 1,375.26	\$ 1,324.87	\$ 1,274.48	\$ 1,224.08
SHP HDM \$1,500/ \$3,000	Emp only	\$ 502.85	\$ 452.46	\$ 402.06	\$ 351.67	\$ 301.28	\$ 250.88
	Emp + Sp	\$ 1,404.05	\$ 1,353.66	\$ 1,303.26	\$ 1,252.87	\$ 1,202.48	\$ 1,152.08
	Emp + Child	\$ 969.65	\$ 919.26	\$ 868.86	\$ 818.47	\$ 768.08	\$ 717.68
	Family	\$ 1,718.45	\$ 1,668.06	\$ 1,617.66	\$ 1,567.27	\$ 1,516.88	\$ 1,466.48
Kaiser HDM \$3,000/ \$6,000	Emp only	\$ 388.85	\$ 338.46	\$ 288.06	\$ 237.67	\$ 187.28	\$ 136.88
	Emp + Sp	\$ 1,177.25	\$ 1,126.86	\$ 1,076.46	\$ 1,026.07	\$ 975.68	\$ 925.28
	Emp + Child	\$ 799.25	\$ 748.86	\$ 698.46	\$ 648.07	\$ 597.68	\$ 547.28
	Family	\$ 1,453.25	\$ 1,402.86	\$ 1,352.46	\$ 1,302.07	\$ 1,251.68	\$ 1,201.28
Kaiser Basic \$2,000/ \$4,000	Emp only	\$ 520.85	\$ 470.46	\$ 420.06	\$ 369.67	\$ 319.28	\$ 268.88
	Emp + Sp	\$ 1,440.05	\$ 1,389.66	\$ 1,339.26	\$ 1,288.87	\$ 1,238.48	\$ 1,188.08
	Emp + Child	\$ 998.45	\$ 948.06	\$ 897.66	\$ 847.27	\$ 796.88	\$ 746.48
	Family	\$ 1,762.85	\$ 1,712.46	\$ 1,662.06	\$ 1,611.67	\$ 1,561.28	\$ 1,510.88

District Paid Premiums	Eligibility	CSEA Value
Annual Health Insurance Cap - CSEA	enrolled in a health plan	\$8,063.00 %prorated
Annual SIG Waive Fee	full time employee waiving health benefits	\$3,600.00
SIG Hartford Life Insurance	enrolled in a health plan	1x's annual salary
The Standard Income Protection (Disability Insurance)	working: CE-40%+ ; CL-15hr/wk+	75% of income

**Medical benefits are only available to employees working:
Certificated = 50% or more**