

El Dorado Union High School District

CERTIFICATED

MEDICAL INSURANCE RATES 10/01/2023 - 09/30/2024

Based on 10 Checks per year and full-time status (0.61 to 1.00 FTE)

Certificated - District Paid Cap	
Hired before 7/1/2022	\$1,662.74/Month
Hired after 7/1/2022	\$1,550.00/Month



3 Tier Plan			
MEDICAL INSURANCE PLANS: CVT Available Plans	Emp. Only	Emp. + One	Emp. + Family
	Total Cost	Total Cost	Total Cost
Anthem PPO 1, Rx A	\$1,587.60	\$2,730.00	\$3,445.20
Anthem PPO 3, Rx B	\$1,459.20	\$2,510.40	\$3,166.80
Anthem PPO 6, Rx B	\$1,290.00	\$2,218.80	\$2,799.60
Anthem PPO 8, Rx B	\$1,167.60	\$2,008.80	\$2,533.20
Anthem PPO Bronze	\$726.00	\$1,249.20	\$1,575.60
Anthem PPO HDHP 1	\$877.20	\$1,508.40	\$1,903.20
Anthem PPO Wellness	\$1,308.00	\$2,250.00	\$2,838.00
Kaiser HMO 1	\$1,551.60	\$2,666.40	\$3,362.40
Kaiser HMO 6	\$1,502.40	\$2,581.20	\$3,255.60
Kaiser HMO 7	\$1,428.00	\$2,454.00	\$3,096.00
Kaiser HMO HSA	\$957.60	\$1,645.20	\$2,047.20
Kaiser HMO Wellness	\$1,208.40	\$2,074.80	\$2,619.60
BlueHPN EPO Premier, Rx A	\$1,167.60	\$2,007.60	\$2,533.20
BlueHPN EPO Prime, Rx B	\$1,135.20	\$1,952.40	\$2,463.60
BlueHPN EPO Saver, Rx B	\$1,077.60	\$1,854.00	\$2,338.80
BlueHPN EPO Value, Rx C	\$841.20	\$1,447.20	\$1,825.20
Dental and Vision Coverage from 10/01/2023 - 09/30/2024			
Dental - Delta Dental - Basic Incentive	\$63.22	\$114.50	\$164.59
Vision - VSP	\$11.93	\$22.16	\$34.13