

CALPERS 2020 HEALTH PREMIUMS

TCUSD Annual Contribution: \$9,000 towards medical, dental, vision and life insurance

MEDICAL PLAN Los Angeles County	Employee Only		Employee and One Dependent		Employee and 2+ Dependents	
	Tenthly	Annual	Tenthly	Annual	Tenthly	Annual
Anthem HMO Select*	743.92	7439.16	1487.83	14878.32	1934.18	19341.84
Anthem HMO Trad.*	1083.16	10831.56	2166.31	21663.12	2816.21	28162.08
Blue Shield Access*	975.80	9758.04	1951.61	19516.08	2537.09	25370.88
Blue Shield Trio*	749.92	7499.16	1499.83	14998.32	1949.78	19497.84
Health Net Salud Y Mas*	470.77	4707.72	941.54	9415.44	1224.01	12240.12
Health Net SmartCare*	778.10	7781.04	1556.21	15562.08	2023.07	20230.68
Kaiser*	797.27	7972.68	1594.54	15945.36	2072.89	20728.92
PERS Choice*	852.35	8523.48	1704.70	17046.96	2216.10	22161.00
PERS Select*	522.89	5228.88	1045.78	10457.76	1359.50	13595.04
PERS Care*	1117.34	11173.44	2234.69	22346.88	2905.09	29050.92
United Healthcare*	801.97	8019.72	1603.94	16039.44	2085.13	20851.32

**THE ABOVE MEDICAL RATES DO NOT REFLECT THE 0.27% ADMINISTRATIVE FEE FROM CALPERS*

CalPERS Medical Ins. – If you live outside of L.A., Riverside or San Bernardino Counties, please contact Personnel for rates.

DENTAL	Tenthly	Annual
Delta Dental Premier (Group No. 07025) – Employee and Family Dependent children are eligible for coverage through the end of the month they turn 25	150.00	1500.00
MetLife Dental (D-HMO) (Plan Name SG50) – Employee and Family Dependent children are eligible for coverage through the end of the month they turn 26	50.93	509.30

VISION	Tenthly	Annual
Medical Eye Service – Employee Only	6.00	60.00
VSP – Employee Only	18.44	184.40
VSP – 2 or more Dependent children are eligible for coverage through the end of the month they turn 25	41.39	413.90

Blue Shield Life Insurance – CPI

TCEA		
<ul style="list-style-type: none"> •Employee Only \$10,000 (Level Term) •Employee with Dependents \$10,000 (Level Term) and \$1,000 for Dependents Indicate number of Dependents _____		
	Tenthly	Annual
Empl. Only	1.80	18.00
Empl. with Dependents	2.52	25.20

CSEA & Management		
<ul style="list-style-type: none"> •Employee Only \$50,000 (Level Term) •Employee with Dependents \$50,000 (Level Term) and \$5,000 for Dependents Indicate number of Dependents _____		
	Tenthly	Annual
Empl. Only	9.00	90.00
Empl. with Dependents	9.72	97.20

Eligible Dependents are spouse, and children up to age 21, or up to 23 if full-time students.