

CALPERS 2020 HEALTH PREMIUMS

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

MEDICAL PLAN Orange County	Employee Only		Employee and One Dependent		Employee and 2+ Dependents	
	Tenthly	Annual	Tenthly	Annual	Tenthly	Annual
Anthem HMO Select*	784.85	7,848.48	1,569.70	15,696.96	2,040.60	20,406.00
Anthem HMO Trad.*	1,121.94	11,219.40	2,243.88	22,438.80	2,917.04	29,170.44
Blue Shield Access*	1,091.84	10,918.44	2,183.69	21,836.88	2,838.79	28,387.92
Health Net Salud Y Mas*	522.17	5,221.68	1,044.34	10,443.36	1,357.63	13,576.32
Health Net SmartCare*	863.11	8,631.12	1,726.22	17,262.24	2,244.10	22,440.96
Kaiser*	774.29	7,742.88	1,548.58	15,485.76	2,013.14	20,131.44
PERS Choice*	883.54	8,835.36	1,767.07	17,670.72	2,297.20	22,971.96
PERS Select*	541.85	5,418.48	1,083.70	10,836.96	1,408.80	14,088.00
PERS Care*	1,183.99	11,839.92	2,367.98	23,679.84	3,078.38	30,783.84
Sharp	727.22	7,272.24	1,454.45	14,544.48	1,890.78	18,907.80
United Healthcare*	805.92	8,059.20	1,611.84	16,118.40	2,095.39	20,953.92

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

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.