

ROSEVILLE CITY SCHOOL DISTRICT
2025-2026 RATES for Percentage Employees
11 Pay (includes employees receiving summer savings)

Medical with Vision

In order to be eligible for vision you must be enrolled in a medical plan

		Classified Employee					
Plan	Tier	4 hrs	4.5 hrs	5 hrs	5.5 hrs	6 hrs	6.5 hrs
		50.00%	56.25%	62.50%	68.75%	75.00%	81.25%
WHA HMO	Emp only	\$ 662.15	\$ 615.77	\$ 569.39	\$ 523.01	\$ 476.63	\$ 430.25
	Emp + Sp	\$ 1,685.43	\$ 1,639.05	\$ 1,592.67	\$ 1,546.29	\$ 1,499.90	\$ 1,453.52
	Emp + Child	\$ 1,194.52	\$ 1,148.14	\$ 1,101.76	\$ 1,055.38	\$ 1,009.00	\$ 962.61
	Family	\$ 2,043.25	\$ 1,996.86	\$ 1,950.48	\$ 1,904.10	\$ 1,857.72	\$ 1,811.34
WHA DHMO	Emp only	\$ 419.97	\$ 373.59	\$ 327.21	\$ 280.83	\$ 234.45	\$ 188.07
	Emp + Sp	\$ 1,201.06	\$ 1,154.68	\$ 1,108.30	\$ 1,061.92	\$ 1,015.54	\$ 969.16
	Emp + Child	\$ 826.88	\$ 780.50	\$ 734.12	\$ 687.74	\$ 641.36	\$ 594.98
	Family	\$ 1,474.88	\$ 1,428.50	\$ 1,382.12	\$ 1,335.74	\$ 1,289.36	\$ 1,242.98
SHP HMO	Emp only	\$ 810.52	\$ 764.14	\$ 717.76	\$ 671.38	\$ 625.00	\$ 578.61
	Emp + Sp	\$ 1,981.06	\$ 1,934.68	\$ 1,888.30	\$ 1,841.92	\$ 1,795.54	\$ 1,749.16
	Emp + Child	\$ 1,418.15	\$ 1,371.77	\$ 1,325.39	\$ 1,279.01	\$ 1,232.63	\$ 1,186.25
	Family	\$ 2,390.15	\$ 2,343.77	\$ 2,297.39	\$ 2,251.01	\$ 2,204.63	\$ 2,158.25
SHP DHMO	Emp only	\$ 577.06	\$ 530.68	\$ 484.30	\$ 437.92	\$ 391.54	\$ 345.16
	Emp + Sp	\$ 1,513.06	\$ 1,466.68	\$ 1,420.30	\$ 1,373.92	\$ 1,327.54	\$ 1,281.16
	Emp + Child	\$ 1,062.52	\$ 1,016.14	\$ 969.76	\$ 923.38	\$ 877.00	\$ 830.61
	Family	\$ 1,840.34	\$ 1,793.96	\$ 1,747.58	\$ 1,701.19	\$ 1,654.81	\$ 1,608.43
Kaiser 25/10 HMO	Emp only	\$ 895.61	\$ 849.23	\$ 802.85	\$ 756.47	\$ 710.09	\$ 663.71
	Emp + Sp	\$ 2,151.25	\$ 2,104.86	\$ 2,058.48	\$ 2,012.10	\$ 1,965.72	\$ 1,919.34
	Emp + Child	\$ 1,547.97	\$ 1,501.59	\$ 1,455.21	\$ 1,408.83	\$ 1,362.45	\$ 1,316.07
	Family	\$ 2,590.88	\$ 2,544.50	\$ 2,498.12	\$ 2,451.74	\$ 2,405.36	\$ 2,358.98
Kaiser DHMO	Emp only	\$ 786.52	\$ 740.14	\$ 693.76	\$ 647.38	\$ 601.00	\$ 554.61
	Emp + Sp	\$ 1,934.15	\$ 1,887.77	\$ 1,841.39	\$ 1,795.01	\$ 1,748.63	\$ 1,702.25
	Emp + Child	\$ 1,383.25	\$ 1,336.86	\$ 1,290.48	\$ 1,244.10	\$ 1,197.72	\$ 1,151.34
	Family	\$ 2,335.61	\$ 2,289.23	\$ 2,242.85	\$ 2,196.47	\$ 2,150.09	\$ 2,103.71

ROSEVILLE CITY SCHOOL DISTRICT
2025-2026 RATES for Percentage Employees
11 Pay (includes employees receiving summer savings)

Medical with Vision

In order to be eligible for vision you must be enrolled in a medical plan

		High Deductible					
Plan	Tier	4 hrs 50.00%	4.5 hrs 56.25%	5 hrs 62.50%	5.5 hrs 68.75%	6 hrs 75.00%	6.5 hrs 81.25%
WHA HD \$2,800/ \$5,600	Emp only	\$ 286.88	\$ 240.50	\$ 194.12	\$ 147.74	\$ 101.36	\$ 54.98
	Emp + Sp	\$ 934.88	\$ 888.50	\$ 842.12	\$ 795.74	\$ 749.36	\$ 702.98
	Emp + Child Family	\$ 623.97 \$1,161.79	\$ 577.59 \$1,115.41	\$ 531.21 \$1,069.03	\$ 484.83 \$1,022.65	\$ 438.45 \$ 976.27	\$ 392.07 \$ 929.89
WHA HDM \$1,800/ \$3,600	Emp only	\$ 386.15	\$ 339.77	\$ 293.39	\$ 247.01	\$ 200.63	\$ 154.25
	Emp + Sp	\$1,132.34	\$1,085.96	\$1,039.58	\$ 993.19	\$ 946.81	\$ 900.43
	Emp + Child Family	\$ 773.43 \$1,393.06	\$ 727.05 \$1,346.68	\$ 680.67 \$1,300.30	\$ 634.29 \$1,253.92	\$ 587.90 \$1,207.54	\$ 541.52 \$1,161.16
SHP HD \$2,500/ \$5,000	Emp only	\$ 413.43	\$ 367.05	\$ 320.67	\$ 274.29	\$ 227.90	\$ 181.52
	Emp + Sp	\$1,185.79	\$1,139.41	\$1,093.03	\$1,046.65	\$1,000.27	\$ 953.89
	Emp + Child Family	\$ 813.79 \$1,455.25	\$ 767.41 \$1,408.86	\$ 721.03 \$1,362.48	\$ 674.65 \$1,316.10	\$ 628.27 \$1,269.72	\$ 581.89 \$1,223.34
SHP HDM \$1,650/ \$3,300	Emp only	\$ 512.70	\$ 466.32	\$ 419.94	\$ 373.56	\$ 327.18	\$ 280.80
	Emp + Sp	\$1,385.43	\$1,339.05	\$1,292.67	\$1,246.29	\$1,199.90	\$1,153.52
	Emp + Child Family	\$ 965.43 \$1,689.79	\$ 919.05 \$1,643.41	\$ 872.67 \$1,597.03	\$ 826.29 \$1,550.65	\$ 779.90 \$1,504.27	\$ 733.52 \$1,457.89
Kaiser HDM \$3,000/ \$6,000	Emp only	\$ 412.34	\$ 365.96	\$ 319.58	\$ 273.19	\$ 226.81	\$ 180.43
	Emp + Sp	\$1,185.79	\$1,139.41	\$1,093.03	\$1,046.65	\$1,000.27	\$ 953.89
	Emp + Child Family	\$ 814.88 \$1,456.34	\$ 768.50 \$1,409.96	\$ 722.12 \$1,363.58	\$ 675.74 \$1,317.19	\$ 629.36 \$1,270.81	\$ 582.98 \$1,224.43
Kaiser Basic \$2,000/ \$4,000	Emp only	\$ 541.06	\$ 494.68	\$ 448.30	\$ 401.92	\$ 355.54	\$ 309.16
	Emp + Sp	\$1,443.25	\$1,396.86	\$1,350.48	\$1,304.10	\$1,257.72	\$1,211.34
	Emp + Child Family	\$1,010.15 \$1,759.61	\$ 963.77 \$1,713.23	\$ 917.39 \$1,666.85	\$ 871.01 \$1,620.47	\$ 824.63 \$1,574.09	\$ 778.25 \$1,527.71

<u>District Paid Premiums</u>	<u>Eligibility</u>	<u>CSEA Value</u>
Annual Health Insurance Cap - CSEA	enrolled in a health plan	\$8,163.00 %prorated
Annual SIG Waive Fee	full time employee waiving health benefits	\$2,700.00
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**