

**ROSEVILLE CITY SCHOOL DISTRICT**  
**2017-2018 RATES for 11 Month Percentage**  
**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

Plan	Tier	Classified Employee							Certificated Employee				
		4 hrs	4.5 hrs	5 hrs	5.5 hrs	6 hrs	6.5 hrs		50%	60%	70%	80%	90%
<b>WHA HMO</b>	Emp only	\$ 440.12	\$ 399.28	\$ 358.45	\$ 317.61	\$ 276.78	\$ 235.94		\$ 440.12	\$ 374.78	\$ 309.45	\$ 244.11	\$ 178.77
	Emp + Sp	\$ 1,197.21	\$ 1,156.37	\$ 1,115.54	\$ 1,074.70	\$ 1,033.87	\$ 993.03		\$ 1,197.21	\$ 1,131.87	\$ 1,066.54	\$ 1,001.20	\$ 935.86
	Emp + Child	\$ 832.85	\$ 792.01	\$ 751.18	\$ 710.34	\$ 669.50	\$ 628.67		\$ 832.85	\$ 767.51	\$ 702.17	\$ 636.84	\$ 571.50
	Family	\$ 1,461.21	\$ 1,420.37	\$ 1,379.54	\$ 1,338.70	\$ 1,297.87	\$ 1,257.03		\$ 1,461.21	\$ 1,395.87	\$ 1,330.54	\$ 1,265.20	\$ 1,199.86
<b>SHP HMO</b>	Emp only	\$ 488.12	\$ 447.28	\$ 406.45	\$ 365.61	\$ 324.78	\$ 283.94		\$ 488.12	\$ 422.78	\$ 357.45	\$ 292.11	\$ 226.77
	Emp + Sp	\$ 1,293.21	\$ 1,252.37	\$ 1,211.54	\$ 1,170.70	\$ 1,129.87	\$ 1,089.03		\$ 1,293.21	\$ 1,227.87	\$ 1,162.54	\$ 1,097.20	\$ 1,031.86
	Emp + Child	\$ 905.94	\$ 865.10	\$ 824.27	\$ 783.43	\$ 742.60	\$ 701.76		\$ 905.94	\$ 840.60	\$ 775.26	\$ 709.93	\$ 644.59
	Family	\$ 1,573.57	\$ 1,532.74	\$ 1,491.90	\$ 1,451.07	\$ 1,410.23	\$ 1,369.40		\$ 1,573.57	\$ 1,508.24	\$ 1,442.90	\$ 1,377.56	\$ 1,312.23
<b>Kaiser 20/10 HMO</b>	Emp only	\$ 520.95	\$ 480.12	\$ 439.28	\$ 398.45	\$ 357.61	\$ 316.78		\$ 520.95	\$ 455.62	\$ 390.28	\$ 324.95	\$ 259.61
	Emp + Sp	\$ 1,368.59	\$ 1,327.76	\$ 1,286.92	\$ 1,246.09	\$ 1,205.25	\$ 1,164.41		\$ 1,368.59	\$ 1,303.25	\$ 1,237.92	\$ 1,172.58	\$ 1,107.25
	Emp + Child	\$ 961.68	\$ 920.85	\$ 880.01	\$ 839.18	\$ 798.34	\$ 757.51		\$ 961.68	\$ 896.35	\$ 831.01	\$ 765.67	\$ 700.34
	Family	\$ 1,664.23	\$ 1,623.39	\$ 1,582.56	\$ 1,541.72	\$ 1,500.89	\$ 1,460.05		\$ 1,664.23	\$ 1,598.89	\$ 1,533.55	\$ 1,468.22	\$ 1,402.88
<b>High Deductible</b>													
<b>WHA HD</b> \$2,800/ \$5,600	Emp only	\$ 166.30	\$ 125.46	\$ 84.63	\$ 43.79	\$ 2.96	\$ -		\$ 166.30	\$ 100.96	\$ 35.63	\$ -	\$ -
	Emp + Sp	\$ 649.57	\$ 608.74	\$ 567.90	\$ 527.07	\$ 486.23	\$ 445.40		\$ 649.57	\$ 584.24	\$ 518.90	\$ 453.56	\$ 388.23
	Emp + Child	\$ 417.21	\$ 376.37	\$ 335.54	\$ 294.70	\$ 253.87	\$ 213.03		\$ 417.21	\$ 351.87	\$ 286.54	\$ 221.20	\$ 155.86
	Family	\$ 812.12	\$ 771.28	\$ 730.45	\$ 689.61	\$ 648.78	\$ 607.94		\$ 812.12	\$ 746.78	\$ 681.45	\$ 616.11	\$ 550.77
<b>WHA HDM</b> \$1,800/ \$3,600	Emp only	\$ 255.75	\$ 214.92	\$ 174.08	\$ 133.25	\$ 92.41	\$ 51.58		\$ 255.75	\$ 190.42	\$ 125.08	\$ 59.75	\$ -
	Emp + Sp	\$ 828.48	\$ 787.65	\$ 746.81	\$ 705.98	\$ 665.14	\$ 624.31		\$ 828.48	\$ 763.15	\$ 697.81	\$ 632.47	\$ 567.14
	Emp + Child	\$ 552.48	\$ 511.65	\$ 470.81	\$ 429.98	\$ 389.14	\$ 348.31		\$ 552.48	\$ 487.15	\$ 421.81	\$ 356.47	\$ 291.14
	Family	\$ 1,021.57	\$ 980.74	\$ 939.90	\$ 899.07	\$ 858.23	\$ 817.40		\$ 1,021.57	\$ 956.24	\$ 890.90	\$ 825.56	\$ 760.23
<b>SHP HD</b> \$2,500/ \$5,000	Emp only	\$ 188.12	\$ 147.28	\$ 106.45	\$ 65.61	\$ 24.78	\$ -		\$ 188.12	\$ 122.78	\$ 57.45	\$ -	\$ -
	Emp + Sp	\$ 693.21	\$ 652.37	\$ 611.54	\$ 570.70	\$ 529.87	\$ 489.03		\$ 693.21	\$ 627.87	\$ 562.54	\$ 497.20	\$ 431.86
	Emp + Child	\$ 452.12	\$ 411.28	\$ 370.45	\$ 329.61	\$ 288.78	\$ 247.94		\$ 452.12	\$ 386.78	\$ 321.45	\$ 256.11	\$ 190.77
	Family	\$ 871.03	\$ 830.19	\$ 789.36	\$ 748.52	\$ 707.69	\$ 666.85		\$ 871.03	\$ 805.69	\$ 740.35	\$ 675.02	\$ 609.68

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Plan	Tier	Classified Employee							Certificated Employee				
		4 hrs	4.5 hrs	5 hrs	5.5 hrs	6 hrs	6.5 hrs		50%	60%	70%	80%	90%
<b>SHP</b>	Emp only	\$ 253.57	\$ 212.74	\$ 171.90	\$ 131.07	\$ 90.23	\$ 49.40		\$ 253.57	\$ 188.24	\$ 122.90	\$ 57.56	\$ -
<b>HDM</b>	Emp + Sp	\$ 824.12	\$ 783.28	\$ 742.45	\$ 701.61	\$ 660.78	\$ 619.94		\$ 824.12	\$ 758.78	\$ 693.45	\$ 628.11	\$ 562.77
\$1,500/ \$3,000	Emp + Child	\$ 551.39	\$ 510.56	\$ 469.72	\$ 428.89	\$ 388.05	\$ 347.21		\$ 551.39	\$ 486.05	\$ 420.72	\$ 355.38	\$ 290.05
	Family	\$ 1,023.75	\$ 982.92	\$ 942.08	\$ 901.25	\$ 860.41	\$ 819.58		\$ 1,023.75	\$ 958.42	\$ 893.08	\$ 827.75	\$ 762.41
<b>Kaiser</b>	Emp only	\$ 240.48	\$ 199.65	\$ 158.81	\$ 117.98	\$ 77.14	\$ 36.31		\$ 240.48	\$ 175.15	\$ 109.81	\$ 44.47	\$ -
\$2,000/ \$4,000	Emp + Sp	\$ 797.94	\$ 757.10	\$ 716.27	\$ 675.43	\$ 634.60	\$ 593.76		\$ 797.94	\$ 732.60	\$ 667.26	\$ 601.93	\$ 536.59
	Emp + Child	\$ 531.75	\$ 490.92	\$ 450.08	\$ 409.25	\$ 368.41	\$ 327.58		\$ 531.75	\$ 466.42	\$ 401.08	\$ 335.75	\$ 270.41
	Family	\$ 993.21	\$ 952.37	\$ 911.54	\$ 870.70	\$ 829.87	\$ 789.03		\$ 993.21	\$ 927.87	\$ 862.54	\$ 797.20	\$ 731.86

<b><u>District Paid Premiums</u></b>	<b><u>Eligibility</u></b>	<b><u>Value</u></b>
Annual Health Insurance Cap	enrolled in a health plan	\$7,187.00 %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