

**ROSEVILLE CITY SCHOOL DISTRICT**  
**2022-2023 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

**Management / Confidential Employee**

Plan	Tier	50%	60%	70%	80%	90%
<b>WHA</b>	Emp only	\$ 376.27	\$ 283.51	\$ 190.75	\$ 97.98	\$ 5.22
	<b>HMO</b>					
	Emp + Sp	\$ 1,205.38	\$ 1,112.62	\$ 1,019.85	\$ 927.09	\$ 834.33
	Emp + Child	\$ 807.20	\$ 714.44	\$ 621.67	\$ 528.91	\$ 436.15
	Family	\$ 1,495.56	\$ 1,402.80	\$ 1,310.04	\$ 1,217.27	\$ 1,124.51
<b>SHP</b>	Emp only	\$ 519.20	\$ 426.44	\$ 333.67	\$ 240.91	\$ 148.15
	<b>HMO</b>					
	Emp + Sp	\$ 1,492.29	\$ 1,399.53	\$ 1,306.76	\$ 1,214.00	\$ 1,121.24
	Emp + Child	\$ 1,025.38	\$ 932.62	\$ 839.85	\$ 747.09	\$ 654.33
	Family	\$ 1,833.75	\$ 1,740.98	\$ 1,648.22	\$ 1,555.45	\$ 1,462.69
<b>Kaiser</b>	Emp only	\$ 508.18	\$ 415.42	\$ 322.65	\$ 229.89	\$ 137.13
	<b>25/10</b>					
	Emp + Sp	\$ 1,480.18	\$ 1,387.42	\$ 1,294.65	\$ 1,201.89	\$ 1,109.13
	<b>HMO</b>					
	Emp + Child	\$ 1,013.27	\$ 920.51	\$ 827.75	\$ 734.98	\$ 642.22
	Family	\$ 1,820.55	\$ 1,727.78	\$ 1,635.02	\$ 1,542.25	\$ 1,449.49

**High Deductible**

<b>WHA</b> HD \$2,800/ \$5,600	Emp only	\$ 79.56	\$ -	\$ -	\$ -	\$ -
	<b>HD</b>					
	Emp + Sp	\$ 609.75	\$ 516.98	\$ 424.22	\$ 331.45	\$ 238.69
	Emp + Child	\$ 352.29	\$ 259.53	\$ 166.76	\$ 74.00	\$ -
	Family	\$ 786.47	\$ 693.71	\$ 600.95	\$ 508.18	\$ 415.42
<b>WHA</b> HDM \$1,800/ \$3,600	Emp only	\$ 174.47	\$ 81.71	\$ -	\$ -	\$ -
	<b>HDM</b>					
	Emp + Sp	\$ 799.56	\$ 706.80	\$ 614.04	\$ 521.27	\$ 428.51
	Emp + Child	\$ 496.29	\$ 403.53	\$ 310.76	\$ 218.00	\$ 125.24
	Family	\$ 1,010.11	\$ 917.35	\$ 824.58	\$ 731.82	\$ 639.05
<b>SHP</b> HD \$2,500/ \$5,000	Emp only	\$ 164.65	\$ 71.89	\$ -	\$ -	\$ -
	<b>HD</b>					
	Emp + Sp	\$ 778.84	\$ 686.07	\$ 593.31	\$ 500.55	\$ 407.78
	Emp + Child	\$ 483.20	\$ 390.44	\$ 297.67	\$ 204.91	\$ 112.15
	Family	\$ 992.65	\$ 899.89	\$ 807.13	\$ 714.36	\$ 621.60

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<b>SHP</b>	Emp only	\$ 244.29	\$ 151.53	\$ 58.76	\$ -	\$ -
<b>HDM</b>	Emp + Sp	\$ 937.02	\$ 844.25	\$ 751.49	\$ 658.73	\$ 565.96
\$1,500/	Emp + Child	\$ 603.20	\$ 510.44	\$ 417.67	\$ 324.91	\$ 232.15
\$3,000	Family	\$ 1,179.20	\$ 1,086.44	\$ 993.67	\$ 900.91	\$ 808.15
<b>Kaiser</b>	Emp only	\$ 220.29	\$ 127.53	\$ 34.76	\$ -	\$ -
\$2,000/	Emp + Sp	\$ 891.20	\$ 798.44	\$ 705.67	\$ 612.91	\$ 520.15
\$4,000	Emp + Child	\$ 569.38	\$ 476.62	\$ 383.85	\$ 291.09	\$ 198.33
	Family	\$ 1,125.75	\$ 1,032.98	\$ 940.22	\$ 847.45	\$ 754.69

<b><u>District Paid Premiums</u></b>	<b><u>Eligibility</u></b>	<b><u>MGT/CNF Value</u></b>
Annual Health Insurance Cap - RTA	enrolled in a health plan	\$10,204.00 %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

**Medical benefits are only available to employees working:  
50% or more**