Roseville City School District 2022-2023 Rates

Rates are based on full time status, Certificated = 100%, & Classified = 35+ hours/week. If you are less than full time see rate sheets for Percentage Employees.

High Deductible Medical with Vision

		rder to be eligible for you must be enrolled in a medical plan										
	Western Health Advantage					Sutter He	Plus	Basic Kaiser			VSP	
	WHHDP		WHMID		SHHDP		SHMID		602214			VSBOO-C
SIG	\$2800/\$5600		\$1800/\$3600		\$2500/\$5000		\$1500/\$3000		\$2000/\$4000			
Group #		W2800		W1800		HD14		HD16		602214B		N/A
Monthly Rates											E	Employee ONLY
Employee Only-Txxx00	\$	489.00	\$	576.00	\$	567.00	\$	640.00	\$	618.00	\$	9.10
Employee & Spouse - TxxxSO	\$	975.00	\$	1,149.00	\$	1,130.00	\$	1,275.00	\$	1,233.00		
Employee & Children-TxxxOA	\$	739.00	\$	871.00	\$	859.00	\$	969.00	\$	938.00		
Family - TxxxSA	\$	1,137.00	\$	1,342.00	\$	1,326.00	\$	1,497.00	\$	1,448.00		

Yearly Cost of Medical Plan with Vision										
Employee Only	\$	5,977.20	\$	7,021.20	\$	6,913.20	\$	7,789.20	\$	7,525.20
Employee & Spouse	\$	11,809.20	\$	13,897.20	\$	13,669.20	\$	15,409.20	\$	14,905.20
Employee & Children	\$	8,977.20	\$	10,561.20	\$	10,417.20	\$	11,737.20	\$	11,365.20
Family	\$	13,753.20	\$	16,213.20	\$	16,021.20	\$	18,073.20	\$	17,485.20

Monthly Medical Cost to Employees Over the Cap										
11 Pay (includes employees receiving summer savings)										
Employee Only	\$	-	\$	-	\$	-	\$	-	\$	-
Employee & Spouse	\$	145.93	\$	335.75	\$	315.02	\$	473.20	\$	427.38
Employee & Children	\$	-	\$	32.47	\$	19.38	\$	139.38	\$	105.56
Family	\$	322.65	\$	546.29	\$	528.84	\$	715.38	\$	661.93
12 Pay										
Employee Only	\$	-	\$	-	\$	-	\$	-	\$	-
Employee & Spouse	\$	133.77	\$	307.77	\$	288.77	\$	433.77	\$	391.77
Employee & Children	\$	-	\$	29.77	\$	17.77	\$	127.77	\$	96.77
Family	\$	295.77	\$	500.77	\$	484.77	\$	655.77	\$	606.77

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