

<b>Full-Time Faculty</b>	<b>Renewal Rates Effective 10/01/2025 (monthly)</b>		
	<b>Total Premium</b>	<b>District Contribution</b>	<b>Employee Contribution</b>
<b>Kaiser Permanente Traditional Plan</b>			
Employee	\$1,297.00	\$1,212.70	\$84.31
Employee + 1	\$2,538.00	\$2,347.65	\$190.35
Family	\$3,572.00	\$3,125.50	\$446.50
<b>Kaiser Permanente Deductible Plan</b>			
Employee	\$1,156.00	\$1,121.32	\$34.68
Employee + 1	\$2,262.00	\$2,160.21	\$101.79
Family	\$3,183.00	\$2,912.45	\$270.56
<b>Kaiser - High Deductible/Health Saving \$1,700 90%</b>			
Employee	\$1,024.00	\$998.40	\$25.60
Employee + 1	\$2,002.00	\$1,931.93	\$70.07
Family	\$2,817.00	\$2,662.07	\$154.94
<b>Blue Shield - 100% Plan A</b>			
Employee	\$1,684.00	\$1,574.54	\$109.46
Employee + 1	\$3,316.00	\$2,802.02	\$513.98
Family	\$4,679.00	\$3,485.86	\$1,193.15
<b>Blue Shield - 80% Plan K</b>			
Employee	\$1,265.00	\$1,208.08	\$56.93
Employee + 1	\$2,486.00	\$2,299.55	\$186.45
Family	\$3,504.00	\$3,066.00	\$438.00
<b>Blue Shield - High Deductible/Health Saving \$1,700 90%</b>			
Employee	\$1,145.00	\$1,116.38	\$28.63
Employee + 1	\$2,247.00	\$2,190.83	\$56.18
Family	\$3,164.00	\$2,989.98	\$174.02
<b>Delta Dental</b>			
Composite Rate - UPM	\$145.00	\$145.00	\$0.00
<b>VSP</b>			
Composite Rate	\$10.40	\$10.40	\$0.00