

ROP

2011/2012 COST OF HEALTH BENEFITS

SCOE's Proposed contribution capped at \$500.00*

*Waiting for ratification from Union

Kaiser High Plan Package 1	Total Premium	SCOE Pays	12 month Employee Cost	10 month Employee Share of Costs
EE only	589.53	500.00	89.53	107.44
EE + 1 Dep	1,267.47	500.00	767.47	920.96
EE + 2/more	1,739.09	500.00	1,239.09	1,486.91

Kaiser High Plan Package 2	Total Premium	SCOE Pays	12 month Employee Cost	10 month Employee Share of Costs
EE only	568.93	500.00	68.93	82.72
EE + 1 Dep	1,223.18	500.00	723.18	867.82
EE + 2/more	1,678.33	500.00	1,178.33	1,414.00

Kaiser MID Option Plan	Total Premium	SCOE Pays	12 month Employee Cost	10 month Employee Share of Costs
EE only	474.99	500.00	0.00	0.00
EE + 1 Dep	1,021.23	500.00	521.23	625.48
EE + 2/more	1,401.23	500.00	901.23	1,081.48

Kaiser High Deductible with H.S.A.	Total Premium	SCOE Pays	12 month Employee Cost	10 month Employee Share of Costs
EE only	369.64	500.00	0.00	0.00
EE + 1 Dep	794.74	500.00	294.74	353.69
EE + 2/more	1090.45	500.00	590.45	708.54

Blue Shield 100% Plan B	Total Premium	SCOE Pays	12 month Employee Cost	10 month Employee Share of Costs
EE only	749.00	500.00	249.00	298.80
EE+1 Dep	1,471.00	500.00	971.00	1,165.20
EE+2/more	2,074.00	500.00	1,574.00	1,888.80

Blue Shield 90% Plan E	Total Premium	SCOE Pays	12 month Employee Cost	10 month Employee Share of Costs
EE only	689.00	500.00	189.00	226.80
EE+1 Dep	1,351.00	500.00	851.00	1,021.20
EE+2/more	1,902.00	500.00	1,402.00	1,682.40

Blue Shield 80% Plan G	Total Premium	SCOE Pays	12 month Employee Cost	10 month Employee Share of Costs
EE only	601.00	500.00	101.00	121.20
EE+1 Dep	1,179.00	500.00	679.00	814.80
EE+2/more	1,661.00	500.00	1,161.00	1,393.20