

ASCOE Hired before 7-1-2011
2018/2019 COST OF HEALTH BENEFITS
SCOE Contribution at 90%

Kaiser High Option Plan	Total Premium	SCOE Pays	12 month Employee Cost	10 months share of cost
	EE only	731.00	657.90	73.10
EE + 1 Dep	1,564.00	1,407.60	156.40	187.68
EE + 2/more	2,150.00	1,935.00	215.00	258.00

Kaiser MID Option Plan	Total Premium	SCOE Pays	12 month Employee Cost	10 months share of cost
	EE only	620.00	558.00	62.00
EE + 1 Dep	1,326.00	1,193.40	132.60	159.12
EE + 2/more	1,824.00	1,641.60	182.40	218.88

Blue Shield 100% Plan B	Total Premium	SCOE Pays	12 month Employee Cost	10 months share of cost
	EE only	778.00	700.20	77.80
EE+1 Dep	1,645.00	1,480.50	164.50	197.40
EE+2/more	2,288.00	2,059.20	228.80	274.56

Blue Shield 90% Plan E	Total Premium	SCOE Pays	12 month Employee Cost	10 months share of cost
	EE only	710.00	639.00	71.00
EE+1 Dep	1,497.00	1,347.30	149.70	179.64
EE+2/more	2,078.00	1,870.20	207.80	249.36

Blue Shield 80% Plan G	Total Premium	SCOE Pays	12 month Employee Cost	10 months share of cost
	EE only	627.00	564.30	62.70
EE+1 Dep	1,322.00	1,189.80	132.20	158.64
EE+2/more	1,836.00	1,652.40	183.60	220.32