

PACIFIC GROVE UNIFIED SCHOOL DISTRICT  
**CLASSIFIED - 12 MONTH**  
 2019 HEALTH, DENTAL, & VISION RATES  
 PAYROLL CHANGE EFF 12/21/2018 PREMIUMS EFF 01/01/2019  
**COST BASED OFF 1.0 FTE - 12 PAY PERIODS**

PLAN	COVERAGE OPTIONS	2018 MONTHLY PREMIUM	DISTRICT MONTHLY CONTRIBUTION	EMPLOYEE MONTHLY COST
<b>PPO \$20</b>	EMPLOYEE ONLY	1201.00	455.55	<b>745.45</b>
Medical				
	EE + 1	2400.00	478.22	<b>1921.78</b>
	FAMILY	3118.00	478.22	<b>2639.78</b>
<b>PPO \$25</b>	EMPLOYEE ONLY	851.00	455.55	<b>395.45</b>
Medical				
	EE + 1	1698.00	478.22	<b>1219.78</b>
	FAMILY	2206.00	478.22	<b>1727.78</b>
<b>PPO \$30</b>	EMPLOYEE ONLY	808.00	455.55	<b>352.45</b>
Medical				
added 6/10/2013	EE + 1	1612.00	478.22	<b>1133.78</b>
	FAMILY	2095.00	478.22	<b>1616.78</b>
<b>PPO \$35</b>	EMPLOYEE ONLY	788.00	455.55	<b>332.45</b>
Medical				
	EE + 1	1571.00	478.22	<b>1092.78</b>
	FAMILY	2040.00	478.22	<b>1561.78</b>
<b>PPO \$40</b>	EMPLOYEE ONLY	766.00	455.55	<b>310.45</b>
Medical				
	EE + 1	1528.00	478.22	<b>1049.78</b>
	FAMILY	1985.00	478.22	<b>1506.78</b>
<b>PPO \$50</b>	EMPLOYEE ONLY	718.00	455.55	<b>262.45</b>
Medical				
	EE + 1	1434.00	478.22	<b>955.78</b>
	FAMILY	1863.00	478.22	<b>1384.78</b>
<b>PPO \$60</b>	EMPLOYEE ONLY	646.00	455.55	<b>190.45</b>
Medical				
	EE + 1	1286.00	478.22	<b>807.78</b>
	FAMILY	1672.00	478.22	<b>1193.78</b>
<b>EPO SOUTHERN CA</b>	EMPLOYEE ONLY	578.00	455.55	<b>122.45</b>
Medical				
	EE + 1	1152.00	478.22	<b>673.78</b>
	FAMILY	1496.00	478.22	<b>1017.78</b>
<b>DENTAL</b>	EMPLOYEE ONLY	59.00	51.23	<b>7.77</b>
	EE + 1	107.00	51.23	<b>55.77</b>
	FAMILY	176.00	51.23	<b>124.77</b>
<b>VISION</b>	EMPLOYEE ONLY	12.00	12.00	<b>0.00</b>
	EE + 1	20.00	12.33	<b>7.67</b>
	FAMILY	35.00	12.33	<b>22.67</b>
*PLEASE NOTE EMPLOYEE COST MAY VARY DUE TO ROUNDING				
RATES SUBJECT TO CHANGE ANNUALLY				