

2010-2011 Health, Dental and Vision Premiums
In effect 7/1/10 - 6/30/11

Monthly Employee Contribution

(Monthly premiums are deducted Pre-Tax
unless employee opts-out)

GREAT WEST / CIGNA STANDARD

Employee only	\$0
Employee + 1 dependent *	\$516
Employee + children	\$658
Employee + family	\$1,131

GREAT WEST / CIGNA BASIC

Employee only	\$0
Employee + 1 dependent *	\$192
Employee + children	\$285
Employee + family	\$596

KAISER PERMANENTE PLAN 220

Employee only	\$0
Employee + 1 dependent *	\$310
Employee + children	\$420
Employee + family	\$788

DELTA DENTAL

Employee only	\$0
Employee + 1 dependent *	\$28
Employee + children	\$33
Employee + family	\$60

VSP VISION (VOLUNTARY)

Employee only	\$6.90
Employee + 1 dependent *	\$13.81
Employee + children	\$14.78
Employee + family	\$23.62

**For Employee + 1 dependent, dependent can be spouse, domestic partner, or unmarried dependent child (up to age 26).*

The District will contribute \$430 per employee per month to the health fund for all plans and \$36 per employee per month dental.