

EL CAMINO COMMUNITY COLLEGE DISTRICT
 Fringe Benefits Premium/Employee Contributions

10 MONTH Employees

JANUARY 1, 2015 through DECEMBER 31, 2015

MEDICAL PLANS Tenthly Rates

CALPERS ANTHEM BLUE CROSS PPO PLANS

PERSCare (90/10)	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$776.53	\$1,553.06	\$2,018.99
District Contribution	\$708.00	\$1,226.40	\$1,593.60
Employee Contribution	\$68.53	\$326.66	\$425.39

PERS Choice (80/20)	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$702.22	\$1,404.43	\$1,825.76
District Contribution	\$702.22	\$1,226.40	\$1,593.60
Employee Contribution	\$0.00	\$178.03	\$232.16

PERS Select (80/20)	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$691.79	\$1,383.58	\$1,798.64
District Contribution	\$691.79	\$1,226.40	\$1,593.60
Employee Contribution	\$0.00	\$157.18	\$205.04

CALPERS HMO PLANS

Blue Shield Access + HMO	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$621.44	\$1,242.89	\$1,615.75
District Contribution	\$621.44	\$1,226.40	\$1,593.60
Employee Contribution	\$0.00	\$16.49	\$22.15

Blue Shield Net Value HMO	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$582.49	\$1,164.98	\$1,514.48
District Contribution	\$582.49	\$1,164.98	\$1,514.48
Employee Contribution	\$0.00	\$0.00	\$0.00

2015 Maximum District Contributions	EMPLOYEE ONLY	TWO-PARTY	FAMILY
	\$708.00	\$1,226.40	\$1,593.60

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JANUARY 1, 2015 through DECEMBER 31, 2015

MEDICAL PLANS Tenthly Rates

CALPERS HMO PLANS

Kaiser	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$625.42	\$1,250.83	\$1,626.08
District Contribution	\$625.42	\$1,226.40	\$1,593.60
Employee Contribution	\$0.00	\$24.43	\$32.48

Anthem HMO Select	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$592.08	\$1,184.16	\$1,539.41
District Contribution	\$592.08	\$1,184.16	\$1,539.41
Employee Contribution	\$0.00	\$0.00	\$0.00

Anthem HMO Traditional	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$757.94	\$1,515.89	\$1,970.65
District Contribution	\$708.00	\$1,226.40	\$1,593.60
Employee Contribution	\$49.94	\$289.49	\$377.05

Health Net Salud y Mas HMO	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$516.85	\$1,033.70	\$1,343.82
District Contribution	\$516.85	\$1,033.70	\$1,343.82
Employee Contribution	\$0.00	\$0.00	\$0.00

Health Net SmartCare HMO	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$682.16	\$1,364.33	\$1,773.62
District Contribution	\$682.16	\$1,226.40	\$1,593.60
Employee Contribution	\$0.00	\$137.93	\$180.02

UnitedHealthcare	EMPLOYEE ONLY	TWO-PARTY	FAMILY
Total Premium	\$550.49	\$1,100.98	\$1,431.26
District Contribution	\$550.49	\$1,100.98	\$1,431.26
Employee Contribution	\$0.00	\$0.00	\$0.00

2015 Maximum District Contributions	EMPLOYEE ONLY	TWO-PARTY	FAMILY
	\$708.00	\$1,226.40	\$1,593.60

