

EL CAMINO COMMUNITY COLLEGE  
Fringe Benefits Premium/Employee Contributions

**12 MONTH Employees**  
JANUARY 1, 2008 through DECEMBER 31, 2008

**MEDICAL PLANS Monthly Rates**

CALPERS BLUE CROSS PPO PLANS

<b>PERS CARE (90/10)</b>	<b>EMPLOYEE ONLY</b>	<b>TWO-PARTY</b>	<b>FAMILY</b>
District Cost	\$697.87	\$1,186.38	\$1,479.48
Employee Cost	0.00	\$209.36	\$334.98
<b>Total Premium</b>	<b>\$697.87</b>	<b>\$1,395.74</b>	<b>\$1,814.46</b>

<b>PERS CHOICE (80/20)</b>	<b>EMPLOYEE ONLY</b>	<b>TWO-PARTY</b>	<b>FAMILY</b>
District Cost	\$449.04	\$763.37	\$951.96
Employee Cost	0.00	\$134.71	\$215.54
<b>Total Premium</b>	<b>\$449.04</b>	<b>\$898.08</b>	<b>\$1,167.50</b>

<b>PERS SELECT (80/20)</b>	<b>EMPLOYEE ONLY</b>	<b>TWO-PARTY</b>	<b>FAMILY</b>
District Cost	\$434.80	\$739.16	\$921.78
Employee Cost	0.00	\$130.44	\$208.70
<b>Total Premium</b>	<b>\$434.80</b>	<b>\$869.60</b>	<b>\$1,130.48</b>

CALPERS HMO PLANS

The District pays CALPERS HMO Plan premiums. There are no employee contributions.

	<b>EMPLOYEE ONLY</b>	<b>TWO-PARTY</b>	<b>FAMILY</b>
<b>BLUE SHIELD HMO</b>	\$392.01	\$784.02	\$1,019.23
<b>BLUE SHIELD – NET VALUE HMO</b>	\$351.77	\$703.54	\$914.60
<b>KAISER</b>	\$359.30	\$718.60	\$934.18

**EMPLOYEE HEALTH INSURANCE 2008**

*Dental and Vision premiums are subject to change in 2008.*