

2017-2018 Medial Insurance Premiums
Certificated Retirees

CAPPED AMOUNT: \$13,128.84									
<u>12 Pay Premium</u>									
	Blue Cross Plan 1 w/A	Blue Cross Plan 1 w/C	Blue Cross Plan 3 w/B	Blue Cross Plan 4 w/C	Blue Cross Plan 6 w/B	Blue Cross Plan 6 w/C	Blue Cross Plan 8 w/B	Blue Cross Plan 8 w/C	Blue Cross Plan 10 w/C
Single	\$ 1,450.00	\$ 1,420.00	\$ 1,335.00	\$ 1,265.00	\$ 1,189.00	\$ 1,169.00	\$ 1,084.00	\$ 1,064.00	\$ 833.00
Single + 1	\$ 2,493.00	\$ 2,442.00	\$ 2,298.00	\$ 2,177.00	\$ 2,047.00	\$ 2,012.00	\$ 1,865.00	\$ 1,830.00	\$ 1,433.00
Single + Fmly	\$ 3,145.00	\$ 3,081.00	\$ 2,898.00	\$ 2,746.00	\$ 2,582.00	\$ 2,538.00	\$ 2,353.00	\$ 2,309.00	\$ 1,808.00
	CVT Bronze Plan	Kaiser 1 (Traditional)	Kaiser 3	Kaiser 4	Kaiser 6	Kaiser 7	High Deductible Health Plan 1	Delta Dental	Vision Services
Single	\$ 633.00	\$ 1,385.00	\$ 1,295.00	\$ 1,271.00	\$ 1,286.00	\$ 1,224.00	\$ 767.00	\$ 66.91	\$ 14.35
Single + 1	\$ 1,088.00	\$ 2,381.00	\$ 2,226.00	\$ 2,185.00	\$ 2,210.00	\$ 2,104.00	\$ 1,318.00	\$ 121.14	\$ 26.65
Single + Fmly	\$ 1,372.00	\$ 3,004.00	\$ 2,808.00	\$ 2,757.00	\$ 2,788.00	\$ 2,654.00	\$ 1,663.00	\$ 174.19	\$ 41.88
	Blue Cross Plan 1 w/A + Medicare A&B	Blue Cross Plan 4 w/C + Medicare A&B	Blue Cross Plan 6 w/C + Medicare A&B	Blue Cross Plan 8 w/C + Medicare A&B	Kaiser 1 w/Senior Advantage/ Subscriber Only				
Single	\$ 550.00	\$ 481.00	\$ 463.00	\$ 440.00	\$ 362.00				
Single + 1	\$ 1,042.00	\$ 912.00	\$ 872.00	\$ 825.00	\$ -				
Single + Fmly	\$ 1,411.00	\$ 1,233.00	\$ 1,175.00	\$ 1,107.00	\$ -				