

ROCKLIN UNIFIED SCHOOL DISTRICT

SIG - Schools Insurance Group Rates for August 1, 2022 to June 30, 2023

RAPA/Superintendents

OUT OF AREA

\$702 Cap per month for full-time employees. Part-time employees (50% or more) receive a cap in proportion to their contract percentage. Please review plan summaries before selecting a medical plan.

Plan	Coverage Level	Medical	Dental Comp	Vision Comp	TOTAL	Employee Cost/Month			
						M/D/V	M/D	M/V	M
Blue Shield of CA TRIO HMO	Employee only	\$1,009.00	\$125.75	\$22.70	\$1,157.45	\$455.45	\$432.75	\$329.70	\$307.00
	EE + Spouse	\$2,018.00	\$125.75	\$22.70	\$2,166.45	\$1,464.45	\$1,441.75	\$1,338.70	\$1,316.00
	EE + Children	\$1,544.00	\$125.75	\$22.70	\$1,692.45	\$990.45	\$967.75	\$864.70	\$842.00
	EE + Family	\$2,371.00	\$125.75	\$22.70	\$2,519.45	\$1,817.45	\$1,794.75	\$1,691.70	\$1,669.00
Blue Shield of CA PPO Savings w/HSA (\$2700/\$2800/\$5200)	Employee only	\$792.00	\$125.75	\$22.70	\$940.45	\$238.45	\$215.75	\$112.70	\$90.00
	EE + Spouse	\$1,583.00	\$125.75	\$22.70	\$1,731.45	\$1,029.45	\$1,006.75	\$903.70	\$881.00
	EE + Children	\$1,211.00	\$125.75	\$22.70	\$1,359.45	\$657.45	\$634.75	\$531.70	\$509.00
	EE + Family	\$1,860.00	\$125.75	\$22.70	\$2,008.45	\$1,306.45	\$1,283.75	\$1,180.70	\$1,158.00
Blue Shield of CA PPO Savings w/HSA (\$4000/\$4000/\$8000)	Employee only	\$726.00	\$125.75	\$22.70	\$874.45	\$172.45	\$149.75	\$46.70	\$24.00
	EE + Spouse	\$1,453.00	\$125.75	\$22.70	\$1,601.45	\$899.45	\$876.75	\$773.70	\$751.00
	EE + Children	\$1,110.00	\$125.75	\$22.70	\$1,258.45	\$556.45	\$533.75	\$430.70	\$408.00
	EE + Family	\$1,703.00	\$125.75	\$22.70	\$1,851.45	\$1,149.45	\$1,126.75	\$1,023.70	\$1,001.00

If "Employee Cost/Month" column is a negative amount, this is the amount that RUSD will contribute to the employees HSA account.