

San Ysidro School District - 2020 Classified Estimated Rates

Plan + Dental one party coverage	Monthly Payroll Deduction	Monthly Employer Contribution	2020 Medical Plan Monthly Cost
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Kaiser 10 -100 Day

Single + Metlife	-	632.00	632.00
Single + Delta	-	632.00	632.00
Dual + Metlife	289.50	957.50	1,247.00
Dual + Delta	295.61	951.39	1,247.00
Family + Metlife	578.15	1,179.85	1,758.00
Family + Delta	584.26	1,173.74	1,758.00

United HealthCare-Net1

Single + Metlife	1.98	736.02	738.00
Single + Delta	8.10	729.90	738.00
Dual + Metlife	401.91	1,044.09	1,446.00
Dual + Delta	408.02	1,037.98	1,446.00
Family + Metlife	731.22	1,297.78	2,029.00
Family + Delta	737.34	1,291.66	2,029.00

SIMNSA

Single + Metlife	-	241.00	241.00
Single + Delta	-	241.00	241.00
Dual + Metlife	-	421.00	421.00
Dual + Delta	-	421.00	421.00
Family + Metlife	-	620.00	620.00
Family + Delta	-	620.00	620.00

Dental Cost

Delta Dental PPO

MetLife Dental HMO

Single	No Cost	No Cost
Two party	\$40.81	No Cost
Family	\$81.61	No Cost

New Plans for the Year 2020

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Harmony \$10

Sharp/UCSD

Single + Metlife	-	694.00	694.00
Single + Delta	-	694.00	694.00
Dual + Metlife	353.33	1,006.67	1,360.00
Dual + Delta	359.44	1,000.56	1,360.00
Family + Metlife	663.44	1,245.56	1,909.00
Family + Delta	669.55	1,239.45	1,909.00

Alliance \$20/\$30

UCSD/Scipps/Mercy/Childrens

Single + Metlife	19.50	749.50	769.00
Single + Delta	25.61	743.39	769.00
Dual + Metlife	430.15	1,065.85	1,496.00
Dual + Delta	436.26	1,059.74	1,496.00
Family + Metlife	766.25	1,324.75	2,091.00
Family + Delta	772.36	1,318.64	2,091.00

Journey Harmony

Sharp/UCSD \$800/\$1,600/\$2,200

Single + Metlife	-	624.00	624.00
Single + Delta	-	624.00	624.00
Dual + Metlife	253.93	967.07	1,221.00
Dual + Delta	253.93	967.07	1,221.00
Family + Metlife	527.88	1,178.12	1,706.00
Family + Delta	527.88	1,178.12	1,706.00