

Rates Effective 7/1/2025

	50% FTE 4 hours a day or 20 hours a week	60% FTE 4.8 hours a day or 24 hours a week	75% FTE 6 hours a day or 30 hours a week	80% FTE 6.4 hours per day or 32 hours a week	81.25% FTE 6.5 hours a day or 32.5 hours a week	100% FTE 8 hours a day or 40 hours a week
	Employee 10thly Cost	Employee 10thly Cost	Employee 10thly Cost	Employee 10thly Cost	Employee 10thly Cost	Employee 10thly Cost
Blue Shield PPO						
Employee Only	\$538.80	\$431.04	\$269.40	\$215.52	\$202.05	\$0.00
Employee + One Dependent	\$1,206.60	\$1,026.72	\$756.90	\$666.96	\$644.48	\$307.20
Employee + Family (2 or more Dependents)	\$1,807.80	\$1,577.28	\$1,231.50	\$1,116.24	\$1,087.43	\$655.20
Blue Shield PPO HSA						
Employee Only	\$393.10	\$314.48	\$196.55	\$157.24	\$147.41	\$0.00
Employee + One Dependent	\$760.48	\$608.38	\$380.24	\$304.19	\$285.18	\$0.00
Employee + Family (2 or more Dependents)	\$1,061.27	\$849.01	\$530.63	\$424.51	\$397.98	\$0.00
Blue Shield HMO 10						
Employee Only	\$501.60	\$401.28	\$250.80	\$200.64	\$188.10	\$0.00
Employee + One Dependent	\$1,059.00	\$879.12	\$609.30	\$519.36	\$496.88	\$159.60
Employee + Family (2 or more Dependents)	\$1,596.60	\$1,366.08	\$1,020.30	\$905.04	\$876.23	\$444.00
Blue Shield HMO 30						
Employee Only	\$462.00	\$369.60	\$231.00	\$184.80	\$173.25	\$0.00
Employee + One Dependent	\$899.40	\$719.52	\$449.70	\$359.76	\$337.28	\$0.00
Employee + Family (2 or more Dependents)	\$1,369.80	\$1,139.28	\$793.50	\$678.24	\$649.43	\$217.20
Blue Shield HMO TRIO						
Employee Only	\$423.60	\$338.88	\$211.80	\$169.44	\$158.85	\$0.00
Employee + One Dependent	\$823.20	\$658.56	\$411.60	\$329.28	\$308.70	\$0.00
Employee + Family (2 or more Dependents)	\$1,152.60	\$922.08	\$576.30	\$461.04	\$432.23	\$0.00
Kaiser 15						
Employee Only	\$448.20	\$358.56	\$224.10	\$179.28	\$168.08	\$0.00
Employee + One Dependent	\$869.40	\$695.52	\$434.70	\$347.76	\$326.03	\$0.00
Employee + Family (2 or more Dependents)	\$1,287.00	\$1,056.48	\$710.70	\$595.44	\$566.63	\$134.40
Kaiser 30						
Employee Only	\$437.40	\$349.92	\$218.70	\$174.96	\$164.03	\$0.00
Employee + One Dependent	\$849.00	\$679.20	\$424.50	\$339.60	\$318.38	\$0.00
Employee + Family (2 or more Dependents)	\$1,230.60	\$1,000.08	\$654.30	\$539.04	\$510.23	\$78.00

Please note not all FTE/hours per week are reflected. For more information please see complete rate sheet table. Please contact Benefits if you have any questions