



CSEA

LUSD Health Insurance Premiums District Contributions & Employee Co-Premiums

All plans include Chiropractic and Acupuncture

2021	Annual Health Plan Premium	Annual District Contribution	Annual Employee Co-Premium	Tenthly Employee Co-Premium	% Paid by District	2020 Tenthly Employee Co-Premium
Kaiser						
Individual	\$8,080	\$7,480	\$600	\$60	93%	\$60
2-party	\$15,980	\$15,270	\$710	\$71	96%	\$60
Family	\$22,530	\$21,410	\$1,120	\$112	95%	\$75
UHC - Network 1						
Individual	\$8,890	\$7,915	\$975	\$98	89%	\$85
2-party	\$17,560	\$16,015	\$1,545	\$155	91%	\$130
Family	\$24,640	\$22,460	\$2,180	\$218	91%	\$183
UHC - Network 2						
Individual	\$11,530	\$7,740	\$3,790	\$379	67%	\$347
2-party	\$22,870	\$15,270	\$7,600	\$760	67%	\$696
Family	\$32,130	\$21,410	\$10,720	\$1,072	67%	\$982
Alliance						
Individual	\$9,440	\$7,740	\$1,700	\$170	82%	\$135
2-party	\$17,720	\$15,270	\$2,450	\$245	86%	\$187
Family	\$24,700	\$21,410	\$3,290	\$329	87%	\$246
UHC Harmony						
Individual	\$8,070	\$7,470	\$600	\$60	93%	\$60
2-party	\$15,930	\$15,270	\$660	\$66	96%	\$78
Family	\$22,350	\$21,410	\$940	\$94	96%	\$112

DELTA DENTAL PPO

INDIVIDUAL	\$44.81	District Paid
2-PARTY	\$38.79	\$83.60
FAMILY	\$68.99	\$113.80

DELTA CARE HMO

INDIVIDUAL	\$33.64	District Paid
2-PARTY	\$27.61	\$61.25
FAMILY	\$56.67	\$90.31

VSP PREMIUM PLAN

INDIVIDUAL	\$10.99
2-PARTY	\$17.08
FAMILY	\$27.09

HYATT LEGAL

\$23.40

FSA (\$125) Medical and Dependent Care Accounts, Disability, Cancer, and Accident Insurance, are also available.