

Soledad Unified School District
Health Care
STA Premium Rates 2022 / AFTER 7/2017
For Employees Hired as of 07/01/17
(11 month rates)

Based on Monterey County Rates

Rates: 1/1/2022 - 12/31/2022

	Member	Member + 1	Family
PERS Anthem HMO Select			
Premium	1,057.01	2,114.02	2,748.23
Premium Paid by the district	(820.38)	(1,518.41)	(1,897.82)
<i>Monthly Premium Amount Due</i>	258.14	649.76	927.72
PERS Platinum			
Premium	1,057.01	2,114.02	2,748.23
Premium Paid by the district	(820.38)	(1,518.41)	(1,897.82)
<i>Monthly Premium Amount Due</i>	258.14	649.76	927.72
PERS Gold			
Premium	701.23	1,402.46	1,823.20
Premium Paid by the district	(701.23)	(1,402.46)	(1,823.20)
<i>Monthly Premium Amount Due</i>	0.00	0.00	0.00
Dental			
Premium	60.30	112.40	194.30
Premium Paid by the district	(60.30)	(61.50)	(61.50)
<i>Monthly Premium Amount Due</i>	0.00	55.53	144.87
Vision			
Premium	12.00	20.10	36.10
Premium Paid by the district	(12.00)	(20.10)	(36.10)
<i>Monthly Premium Amount Due</i>	0.00	0.00	0.00