

**ROSS VALLEY SCHOOL DISTRICT**  
**Health & Welfare Benefit Comparison 2023-2024**

Medical Effective 1-1-24 ~ Dental Effective 10-1-23	Monthly Amounts			
	Employee Only	Employee + One	Employee + Two	% CHG
<b>DENTAL</b>				
Delta Dental (Rates effective thru September 30, 2024)	67.92	135.86	197.01	0.00%
<b>MEDICAL UNDER PERS HEALTH BENEFIT (Rates effective thru 12/31/23)</b> (Mandatory ~ Waiver allowed)				
<b>HMOs</b> Plan Code				
Anthem Blue Cross Traditional HMO 509	1,339.70	2,679.40	3,483.22	10.65%
Blue Shield Access+ 525	1,076.84	2,153.68	2,799.78	4.02%
Kaiser HMO 533	1,021.41	2,042.82	2,655.67	11.78%
United Healthcare Signature Value Alliance 576	1,091.13	2,182.26	2,836.94	n/a
Western Health Advantage 591	807.23	1,614.46	2,098.80	6.19%
<b>PPOs</b>				
PERS Gold (Select) 613	914.82	1,829.64	2,378.53	10.81%
PERS Platinum (Choice) 601	1,314.27	2,628.54	3,417.10	9.51%
<b>INCOME PROTECTION PLAN (Mandatory)</b>				
The Standard Group Disability	Sliding Scale	*See backside for rate scale		
Total Monthly with Kaiser & Delta Dental	1,089.33			

Medical Effective 1-1-23 ~ Dental Effective 10-1-22	Monthly Amounts			
	Employee Only	Employee + One	Employee + Two	% CHG
<b>DENTAL</b>				
Delta Dental (Rates effective thru September 30, 2023)	67.92	135.86	197.01	0.00%
<b>MEDICAL UNDER PERS HEALTH BENEFIT (Rates effective thru 12/31/22)</b> (Mandatory ~ Waiver allowed)				
<b>HMOs</b>				
Anthem Blue Cross Traditional HMO 509	1,210.71	2,421.42	3,147.85	-7.15%
Blue Shield Access+ 525	1,035.21	2,070.42	2,691.55	-7.24%
Kaiser HMO 533	913.74	1,827.48	2,375.72	6.61%
Health Net SmartCare HMO (Ending 12/31/2023) 528	1,174.50	2,349.00	3,053.70	1.86%
Western Health Advantage 591	760.17	1,520.34	1,976.44	2.55%
<b>PPOs</b>				
PERS Gold (Select) 557	825.61	1,651.22	2,146.59	17.74%
PERS Platinum (Choice) 566	1,200.12	2,400.24	3,120.31	13.54%
<b>INCOME PROTECTION PLAN (Mandatory)</b>				
The Standard Maximum Premium	Sliding Scale	*See backside for rate scale		
Total Monthly with Kaiser & Delta Dental	981.66			

**PLEASE NOTE:**

**Open Enrollment Dates for Medical: 9/18/23-10/13/23    There is No Open Enrollment for Dental Coverage**

- Effective 1/1/24 District H&W Cap for Classified Employees: \$981.66/mo or \$11,779.92/yr plus Income Protection
- Effective 1/1/24 District H&W Cap for Certificated Employees: \$981.66/mo or \$11,779.92/yr plus Income Protection
- For all employees hired after 1/1/2001 - the Cap is prorated by FTE

**For More Information:**

- Anthem Blue Cross HMO Traditional - [www.anthem.com/ca/calpers](http://www.anthem.com/ca/calpers) or (855) 839-4524
- Blue Shield Access+ HMO - (800) 334-5847
- Kaiser Permanente - [www.kp.org/calpers](http://www.kp.org/calpers) or (800) 464-4000 or (800) 305-1220
- PERS Gold or Platinum (Anthem Blue Cross PPO) - [www.anthem.com/ca/calpers](http://www.anthem.com/ca/calpers) or (877) 737-7776
- United Healthcare Signature Value Alliance - [www.whyuhc.com/calpers](http://www.whyuhc.com/calpers) or (877) 359-3714
- Western Health Advantage - [www.westernhealth.com/calpers/plans-and-benefits/](http://www.westernhealth.com/calpers/plans-and-benefits/) or (888) 942-7377
- CalPERS information & publications - [www.my.calpers.ca.gov](http://www.my.calpers.ca.gov) or (888) 225-7377
- Health Benefits Summary - <https://www.calpers.ca.gov/docs/forms-publications/2022-health-benefit-summary.pdf>