

2025 SDTI Full-Time Employees

Medical					
Plan/Coverage Level	Monthly Premium	Monthly Employer Rate	Monthly Employee Rate	Per Pay Period Employee Rate	Annual Employer Contribution to HRA
Blue Shield Trio HMO					
Employee Only	\$685.00	\$470.67	\$214.33	\$98.92	
Employee + Child(ren)	\$1,367.00	\$972.70	\$394.30	\$181.98	
Employee + Spouse/RDP*	\$1,505.00	\$889.02	\$615.98	\$284.30	
Family	\$2,051.00	\$1,307.39	\$743.61	\$343.20	
Kaiser HMO					
Employee Only	\$696.00	\$470.67	\$225.33	\$104.00	
Employee + Child(ren)	\$1,390.00	\$972.70	\$417.30	\$192.60	
Employee + Spouse/RDP*	\$1,530.00	\$889.02	\$640.98	\$295.84	
Family	\$2,086.00	\$1,307.39	\$778.61	\$359.36	
Blue Shield HMO					
Employee Only	\$778.00	\$470.67	\$307.33	\$141.84	
Employee + Child(ren)	\$1,559.00	\$972.70	\$586.30	\$270.60	
Employee + Spouse/RDP*	\$1,714.00	\$889.02	\$824.98	\$380.76	
Family	\$2,336.00	\$1,307.39	\$1,028.61	\$474.74	
Blue Shield PPO					
Employee Only	\$926.33	\$470.67	\$455.66	\$210.30	\$1,000.00
Employee + Child(ren)	\$1,853.67	\$972.70	\$880.97	\$406.60	\$2,000.00
Employee + Spouse/RDP*	\$2,021.67	\$889.02	\$1,132.65	\$522.76	\$2,000.00
Family	\$2,779.00	\$1,307.39	\$1,471.61	\$679.20	\$3,000.00

Low Dental PPO (\$1,000 Max Annual Benefit)				
Coverage Level	Monthly Premium	Monthly Employer Rate	Monthly Employee Rate	Per Pay Period Employee Rate
Employee Only	\$29.25	\$14.75	\$14.50	\$6.69
Employee + Child(ren)	\$63.60	\$22.12	\$41.48	\$19.14
Employee + Spouse/RDP*	\$58.23	\$22.12	\$36.11	\$16.67
Family	\$98.95	\$22.12	\$76.83	\$35.46

High Dental PPO (\$2,500 Max Annual Benefit)				
Coverage Level	Monthly Premium	Monthly Employer Rate	Monthly Employee Rate	Per Pay Period Employee Rate
Employee Only	\$43.82	\$14.75	\$29.07	\$13.42
Employee + Child(ren)	\$95.54	\$22.12	\$73.42	\$33.89
Employee + Spouse/RDP*	\$87.59	\$22.12	\$65.47	\$30.22
Family	\$148.92	\$22.12	\$126.80	\$58.52

Vision				
Coverage Level	Monthly Premium	Monthly Employer Rate	Monthly Employee Rate	Per Pay Period Employee Rate
Employee Only	\$4.74	\$1.91	\$2.83	\$1.31
Employee + One Dependent	\$8.90	\$2.97	\$5.93	\$2.74
Family	\$12.68	\$4.24	\$8.44	\$3.90

* Registered Domestic Partner (RDP)