

RIVERSIDE UNIFIED SCHOOL DISTRICT
10thly PREMIUMS
EFFECTIVE 1/1/2021 through 12/31/2021
CLASSIFIED EMPLOYEES

PENDING NEGOTIATIONS

				<u>Full-time</u> 30-40 HRS	<u>75%</u> 27.5-29 HRS	<u>62.5%</u> 22.5-27 HRS	<u>50%</u> 20-22 HRS
For any medical plan selected, RUSD will contribute: →				\$1,289.00	\$966.75	\$805.63	\$644.50
				<u>Employees Pay the following tenthly payroll deduction based on their weekly FTE:</u>			
	<u>10thly Premium</u>	<u>2020 RUSD Cap</u>		<u>Full-time</u>	<u>75%</u>	<u>62.5%</u>	<u>50%</u>
RUSD PPO Plan							
PPO	\$2,498.01	- \$1,289.00	=	\$1,209.01	\$1,531.26	\$1,692.39	\$1,853.51
High Deductible PPO	\$2,295.58	- \$1,289.00	=	\$1,006.58	\$1,328.83	\$1,489.96	\$1,651.08
Kaiser Plan (VEBA)	\$1,750.80	- \$1,289.00	=	\$461.80	\$784.05	\$945.18	\$1,106.30
RUSD EPO Plan							
EPO	\$1,318.70	- \$1,289.00	=	\$29.70	\$351.95	\$513.08	\$674.20
High Deductible EPO	\$1,184.97	- \$1,289.00	=	\$0.00	\$218.22	\$379.35	\$540.47
Delta Dental <i>Includes ortho</i>	\$140.03	- \$95.49	=	\$44.54	\$68.41	\$80.35	\$92.29
Preferred Advantage							
Dental <i>Includes ortho</i>	\$102.87	- \$83.80	=	\$19.07	\$40.02	\$50.50	\$60.97
Metlife Dental <i>includes ortho</i>	\$35.00	- \$37.30	=	\$0.00	\$7.03	\$11.69	\$16.35

MEDICAL/DENTAL BENEFIT WAIVER INFO

For employees with verifiable benefits outside of RUSD, or with an RUSD benefit-eligible spouse

<u>TENTHLY WAIVER STIPENDS FOR EMPLOYEES WITH WAIVERS FROM 2014-2018</u>				
	<u>Full-time</u> 30-40 HRS	<u>75%</u> 27.5-29 HRS	<u>62.5%</u> 22.5-27 HRS	<u>50%</u> 20-22 HRS
Medical only	\$100.00	\$75.00	\$62.50	\$50.00
Dental only	\$0.00	\$0.00	\$0.00	\$0.00
Medical and dental	\$100.00	\$75.00	\$62.50	\$50.00
<u>TENTHLY WAIVER STIPEND FOR EMPLOYEES WITH BENEFIT WAIVERS IN PLACE PRIOR TO 2014</u>				
Medical only	\$50.00	\$37.50	\$31.25	\$25.00
Dental only	\$15.00	\$11.25	\$9.38	\$7.50
Medical and dental	\$65.00	\$48.75	\$40.63	\$32.50
<u>TENTHLY WAIVER STIPENDS FOR NEW WAIVERS - Effective 1/1/19</u>				
Medical only	\$50.00	\$37.50	\$31.25	\$25.00
Dental only	\$0.00	\$0.00	\$0.00	\$0.00
Medical and dental	\$65.00	\$48.75	\$40.63	\$32.50
<u>TENTHLY WAIVER STIPEND ONLY FOR EMPLOYEES WITH BENEFIT ELIGIBLE SPOUSE IN RUSD PRIOR TO 2014</u>				
Medical only	\$75.00	\$56.25	\$46.88	\$37.50
Dental only	\$15.00	\$11.25	\$9.38	\$7.50
Medical and dental	\$90.00	\$67.50	\$56.26	\$45.00
<u>TENTHLY WAIVER STIPEND ONLY FOR EMPLOYEES WITH BENEFIT ELIGIBLE SPOUSE IN RUSD - 2014 to Present</u>				
Medical only	\$75.00	\$56.25	\$46.88	\$37.50
Dental only	\$0.00	\$0.00	\$0.00	\$0.00
Medical and dental	\$90.00	\$67.50	\$56.25	\$45.00