

Woodland Joint Unified School District

Benefit Rate Sheet Effective 1/1/2023 Classified Early Retirees

Rates listed are monthly rates

		Western Health Advantage Monthly Premium Cost			Kaiser Permanente Monthly Premium Cost		
		High Option	Low Option #1	Low Option #2	High Option	Low Option #1	Low Option #2
Employee		\$851.37	\$692.56	\$625.87	\$1,235.38	\$1,008.02	\$820.22
Employee + One		\$1,400.21	\$1,139.01	\$1,029.34	\$2,038.37	\$1,663.24	\$1,353.36
Employee + Family		\$1,864.62	\$1,516.78	\$1,370.75	\$2,717.82	\$2,217.65	\$1,804.48
			Sutter Health Plus High Plan Monthly Premium Cost				
Employee				\$1,174.70			
Employee + One				\$1,938.00			
Employee + Family				\$2,584.00			
	Delta Dental Incentive Monthly Premium Cost			Delta Dental Alternative Monthly Premium Cost			
Employee	\$61.91			\$55.37			
Employee + One	\$117.63			\$105.21			
Employee + Family	\$179.54			\$160.58			
EyeMed Classic Monthly (MES has merged wi			Premium Cost EyeMed Enhanced Monthly Premium Cost th EyeMed) (MES has merged with EyeMed)				
Employee			\$5.80		\$12.01		
Employee + One \$11.58				\$23.97			
Employee + Family			\$17.37		\$35.91		

Additional plan information is available on the WJUSD website at https://www.wjusd.org/Departments/Business/Benefits/index.html or at the district office located at 435 Sixth Street, Woodland CA 95695