

**YOSEMITE COMMUNITY COLLEGE DISTRICT
Super-Composite and COBRA Monthly Premium Rates
Effective October 1, 2015– September 30, 2016**

Super Composite YCCD Benefit Premiums

Carrier			Monthly Premium
Kaiser HMO	(District Paid)	Option #1	\$1,251.00
Blue Shield PPO 80%	(District Paid)	Option #2	\$1,420.00
Blue Shield PPO 80C Buy Up		Option #3	\$1,577.00
Blue Shield PPO 90%		Option #4	\$1,574.00
Blue Shield PPO 100%		Option #5	\$1,669.00
Delta Dental – Incentive 70% -100%	(District Paid)		\$ 119.40
Delta Dental – PPO 100%	(District Paid)		\$ 101.00
Vision Service Plan	(District Paid)		\$ 22.10
Cigna Life Insurance \$50,000	(District Paid)		\$ 5.00

**COBRA Benefit Premiums
(Continuation of Coverage at Employee's Expense)**

Non-Core Benefits		
Kaiser HMO -	Option #1	Pending
Blue Shield PPO 80G	Option #2	Pending
Blue Shield PPO 80C Buy-Up	Option #3	Pending
Blue Shield PPO 90% (new)	Option #4	Pending
Blue Shield PPO 100%	Option #5	Pending
Delta Dental Premier/Incentive Plan		\$ 121.79
Delta Dental PPO		\$ 103.20
Vision Service Plan		\$ 22.54

PLEASE NOTE: COBRA Benefits are administered by SISC III

- Health coverage may be elected without the dental and vision coverage.
- The dental and vision coverage cannot be elected without the health coverage.

You may access the following website to research other options for Health & Welfare Benefits: www.coverageforall.org (not affiliated with YCCD)