

Employee Health Benefit  
2024 SCTA Over 65 Retiree Rate She  
January 1, 2024 - December 31, 2

12-Month Deductions

Medical Plans/Tiers	Full Premium	District Pays	Employee Pays
<b>Kaiser Senior Advantage</b>			
Retiree Only	\$347.02	\$347.02	\$0.00
Retiree + 1	\$694.04	\$347.02	\$347.02
<b>Health Net HMO</b>			
Retiree Only	\$377.00	\$377.00	\$0.00
Retiree + 1	\$754.00	\$377.00	\$377.00
<b>Premier Access Dental</b>			
Retiree Only	\$27.37	\$0.00	\$27.37
Retiree + 1	\$49.27	\$0.00	\$49.27
Family	\$82.10	\$0.00	\$82.10
<b>Delta Dental</b>			
Retiree Only	\$56.59	\$0.00	\$56.59
Retiree + 1	\$113.17	\$0.00	\$113.17
Family	\$160.14	\$0.00	\$160.14
<b>VSP Vision Plan</b>			
Retiree Only	\$20.56	\$0.00	\$20.56
Retiree + 1	\$13.65	\$0.00	\$13.65
Family	\$13.65	\$0.00	\$13.65
<b>Sun Life Plan</b>			
Retiree Only	\$1.80	\$0.00	\$1.80
Retiree + 1	\$2.43	\$0.00	\$2.43