

Part Time Employees with EyeMed (32 Hour)

EMPLOYEE CONTRIBUTIONS 2023-2024

AMOUNTS LISTED ARE THE EMPLOYEES SHARE OF THE MONTHLY PREMIUM AND INCLUDE THE DISTRICT CONTRIBUTION; DEDUCTIONS INCLUDE MEDICAL, DENTAL, VISION AND GTL

ANTHEM HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
HMO 20 - Delta PPO	\$186.97	\$961.40	\$714.16	\$1,411.91
HMO 20 - Delta Incentive *	\$186.81	\$960.60	\$713.36	\$1,411.11
HMO 20 - Anthem PPO	\$183.90	\$946.04	\$698.80	\$1,396.55
HMO 20 - MetLife DHMO	\$171.26	\$898.78	\$653.53	\$1,351.28
HMO 30 - Delta PPO	\$176.05	\$846.72	\$615.87	\$1,250.81
HMO 30 - Delta Incentive *	\$175.89	\$845.92	\$615.07	\$1,250.01
HMO 30 - Anthem PPO	\$172.98	\$831.36	\$600.51	\$1,235.45
HMO 30 - MetLife DHMO	\$160.34	\$784.10	\$555.24	\$1,190.18
DMHO 500 - Delta PPO	\$161.63	\$695.33	\$486.10	\$1,038.15
DHMO 500 - Delta Incentive*	\$161.47	\$694.53	\$485.30	\$1,037.35
DHMO 500 - Anthem PPO	\$158.56	\$679.97	\$470.74	\$1,022.79
DHMO 500 - MetLife DHMO	\$145.92	\$632.71	\$425.47	\$977.52

KAISER HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser HMO 20 - Delta PPO	\$170.02	\$855.75	\$708.14	\$1,196.15
Kaiser HMO 20 - Delta Incentive *	\$169.86	\$854.95	\$707.34	\$1,195.35
Kaiser HMO 20 - Anthem PPO	\$166.95	\$840.39	\$692.78	\$1,180.79
Kaiser HMO 20 - MetLife DHMO	\$154.31	\$793.13	\$647.51	\$1,135.52
Kaiser DHMO 500 - Delta PPO	\$145.86	\$589.97	\$466.55	\$833.75
Kaiser DHMO 500 - Delta Incentive *	\$145.70	\$589.17	\$465.75	\$832.95
Kaiser DHMO 500 - Anthem PPO	\$142.79	\$574.61	\$451.19	\$818.39
Kaiser DHMO 500 - MetLife DHMO	\$130.15	\$527.35	\$405.92	\$773.12
Kaiser HSA - Delta PPO	\$135.10	\$471.66	\$358.96	\$672.39
Kaiser HSA - Delta Incentive *	\$134.94	\$470.86	\$358.16	\$671.59
Kaiser HSA - Anthem PPO	\$132.03	\$456.30	\$343.60	\$657.03
Kaiser HSA - MetLife DHMO	\$119.39	\$409.04	\$298.33	\$611.76

ANTHEM PPO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
PPO 500 - Delta PPO	\$1,028.07	\$2,837.14	\$2,321.94	\$4,046.88
PPO 500 - Delta Incentive *	\$1,027.27	\$2,836.34	\$2,321.14	\$4,046.08
PPO 500 - Anthem PPO	\$1,012.71	\$2,821.78	\$2,306.58	\$4,031.52
PPO 500 - MetLife DHMO	\$949.53	\$2,774.52	\$2,261.31	\$3,986.25
PPO 750 - Delta PPO	\$857.75	\$2,479.47	\$2,015.37	\$3,544.44
PPO 750 - Delta Incentive *	\$856.95	\$2,478.67	\$2,014.57	\$3,543.64
PPO 750 - Anthem PPO	\$842.39	\$2,464.11	\$2,000.01	\$3,529.08
PPO 750 - MetLife DHMO	\$779.21	\$2,416.85	\$1,954.74	\$3,483.81
PPO ESS - Delta PPO	\$443.26	\$1,609.04	\$1,269.28	\$2,321.69
PPO ESS - Delta Incentive *	\$442.46	\$1,608.24	\$1,268.48	\$2,320.89
PPO ESS - Anthem PPO	\$427.90	\$1,593.68	\$1,253.92	\$2,306.33
PPO ESS - MetLife DHMO	\$364.72	\$1,546.42	\$1,208.65	\$2,261.06
PPO HSA - Delta PPO	\$269.83	\$1,244.84	\$957.11	\$1,810.08
PPO HSA -Delta Incentive *	\$269.03	\$1,244.04	\$956.31	\$1,809.28
PPO HSA - Anthem PPO	\$254.47	\$1,229.48	\$941.75	\$1,794.72
PPO HSA -MetLife DHMO	\$191.29	\$1,182.22	\$896.48	\$1,749.45

MINIMUM VALUE MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser MVP - Delta PPO	\$115.87	\$260.05	\$166.61	\$383.88
Kaiser MVP - Delta Incentive *	\$115.71	\$259.25	\$165.81	\$383.08
Kaiser MVP - Anthem PPO	\$112.79	\$244.69	\$151.25	\$368.52
Kaiser MVP - MetLife DHMO	\$100.16	\$197.43	\$105.98	\$323.25
PPO CHOICE MVP - Delta PPO	\$0.00	\$134.55	\$5.43	\$250.38
PPO CHOICE MVP - Delta Incentive *	\$0.00	\$133.75	\$4.63	\$249.58
PPO CHOICE MVP - Anthem PPO	\$0.00	\$119.19	\$0.00	\$235.02
PPO CHOICE MVP - MetLife DHMO	\$0.00	\$71.93	\$0.00	\$189.75

IMPORTANT: If you have 2 or more children on a METLIFE Dental Plan there is an additional cost of \$1.99 per month.

*PLEASE NOTE: *Delta Incentive* is not available for new enrollments.



Medical, Dental, Vision And Term Life (please click here).
To review Benefit Plan Summaries, please visit our page and select Health & Welfare dropdown.

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Part Time Employees with EyeMed (30 Hour)

EMPLOYEE CONTRIBUTIONS 2023-2024

AMOUNTS LISTED ARE THE EMPLOYEES SHARE OF THE MONTHLY PREMIUM AND INCLUDE THE DISTRICT CONTRIBUTION; DEDUCTIONS INCLUDE MEDICAL, DENTAL, VISION AND GTL

ANTHEM HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
HMO 20 - Delta PPO	\$233.72	\$1,016.40	\$769.16	\$1,482.54
HMO 20 - Delta Incentive *	\$233.52	\$1,015.60	\$768.36	\$1,481.74
HMO 20 - Anthem PPO	\$229.88	\$1,001.04	\$753.80	\$1,467.18
HMO 20 - MetLife DHMO	\$214.08	\$953.78	\$708.53	\$1,421.91
HMO 30 - Delta PPO	\$220.06	\$901.72	\$670.87	\$1,321.44
HMO 30 - Delta Incentive *	\$219.86	\$900.92	\$670.07	\$1,320.64
HMO 30 - Anthem PPO	\$216.22	\$886.36	\$655.51	\$1,306.08
HMO 30 - MetLife DHMO	\$200.43	\$839.10	\$610.24	\$1,260.81
DMHO 500 - Delta PPO	\$202.04	\$750.33	\$541.10	\$1,108.78
DHMO 500 - Delta Incentive*	\$201.84	\$749.53	\$540.30	\$1,107.98
DHMO 500 - Anthem PPO	\$198.20	\$734.97	\$525.74	\$1,093.42
DHMO 500 - MetLife DHMO	\$182.41	\$687.71	\$480.47	\$1,048.15

KAISER HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser HMO 20 - Delta PPO	\$212.53	\$910.75	\$763.14	\$1,266.78
Kaiser HMO 20 - Delta Incentive *	\$212.33	\$909.95	\$762.34	\$1,265.98
Kaiser HMO 20 - Anthem PPO	\$208.69	\$895.39	\$747.78	\$1,251.42
Kaiser HMO 20 - MetLife DHMO	\$192.89	\$848.13	\$702.51	\$1,206.15
Kaiser DHMO 500 - Delta PPO	\$182.32	\$644.97	\$521.55	\$904.38
Kaiser DHMO 500 - Delta Incentive *	\$182.12	\$644.17	\$520.75	\$903.58
Kaiser DHMO 500 - Anthem PPO	\$178.48	\$629.61	\$506.19	\$889.02
Kaiser DHMO 500 - MetLife DHMO	\$162.69	\$582.35	\$460.92	\$843.75
Kaiser HSA - Delta PPO	\$168.88	\$526.66	\$413.96	\$743.02
Kaiser HSA - Delta Incentive *	\$168.68	\$525.86	\$413.16	\$742.22
Kaiser HSA - Anthem PPO	\$165.04	\$511.30	\$398.60	\$727.66
Kaiser HSA - MetLife DHMO	\$149.24	\$464.04	\$353.33	\$682.39

ANTHEM PPO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
PPO 500 - Delta PPO	\$1,078.07	\$2,892.14	\$2,376.94	\$4,117.51
PPO 500 - Delta Incentive *	\$1,077.27	\$2,891.34	\$2,376.14	\$4,116.71
PPO 500 - Anthem PPO	\$1,062.71	\$2,876.78	\$2,361.58	\$4,102.15
PPO 500 - MetLife DHMO	\$999.53	\$2,829.52	\$2,316.31	\$4,056.88
PPO 750 - Delta PPO	\$907.75	\$2,534.47	\$2,070.37	\$3,615.07
PPO 750 - Delta Incentive *	\$906.95	\$2,533.67	\$2,069.57	\$3,614.27
PPO 750 - Anthem PPO	\$892.39	\$2,519.11	\$2,055.01	\$3,599.71
PPO 750 - MetLife DHMO	\$829.21	\$2,471.85	\$2,009.74	\$3,554.44
PPO ESS - Delta PPO	\$493.26	\$1,664.04	\$1,324.28	\$2,392.32
PPO ESS - Delta Incentive *	\$492.46	\$1,663.24	\$1,323.48	\$2,391.52
PPO ESS - Anthem PPO	\$477.90	\$1,648.68	\$1,308.92	\$2,376.96
PPO ESS - MetLife DHMO	\$414.72	\$1,601.42	\$1,263.65	\$2,331.69
PPO HSA - Delta PPO	\$319.83	\$1,299.84	\$1,012.11	\$1,880.71
PPO HSA -Delta Incentive *	\$319.03	\$1,299.04	\$1,011.31	\$1,879.91
PPO HSA - Anthem PPO	\$304.47	\$1,284.48	\$996.75	\$1,865.35
PPO HSA -MetLife DHMO	\$241.29	\$1,237.22	\$951.48	\$1,820.08

MINIMUM VALUE MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser MVP - Delta PPO	\$144.83	\$315.05	\$221.61	\$454.51
Kaiser MVP - Delta Incentive *	\$144.63	\$314.25	\$220.81	\$453.71
Kaiser MVP - Anthem PPO	\$140.99	\$299.69	\$206.25	\$439.15
Kaiser MVP - MetLife DHMO	\$125.20	\$252.43	\$160.98	\$393.88
PPO CHOICE MVP - Delta PPO	\$0.00	\$189.55	\$60.43	\$321.01
PPO CHOICE MVP - Delta Incentive *	\$0.00	\$188.75	\$59.63	\$320.21
PPO CHOICE MVP - Anthem PPO	\$0.00	\$174.19	\$45.07	\$305.65
PPO CHOICE MVP - MetLife DHMO	\$0.00	\$126.93	\$0.00	\$260.38

IMPORTANT: If you have 2 or more children on a METLIFE Dental Plan there is an additional cost of \$1.99 per month.
 *PLEASE NOTE: *Delta Incentive* is not available for new enrollments.



Medical, Dental, Vision And Term Life (please click here).
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Part Time Employees with EyeMed (29 Hour)

EMPLOYEE CONTRIBUTIONS 2023-2024

AMOUNTS LISTED ARE THE EMPLOYEES SHARE OF THE MONTHLY PREMIUM AND INCLUDE THE DISTRICT CONTRIBUTION; DEDUCTIONS INCLUDE MEDICAL, DENTAL, VISION AND GTL

ANTHEM HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
HMO 20 - Delta PPO	\$257.09	\$1,043.90	\$796.66	\$1,517.85
HMO 20 - Delta Incentive *	\$256.87	\$1,043.10	\$795.86	\$1,517.05
HMO 20 - Anthem PPO	\$252.86	\$1,028.54	\$781.30	\$1,502.49
HMO 20 - MetLife DHMO	\$235.49	\$981.28	\$736.03	\$1,457.22
HMO 30 - Delta PPO	\$242.07	\$929.22	\$698.37	\$1,356.75
HMO 30 - Delta Incentive *	\$241.85	\$928.42	\$697.57	\$1,355.95
HMO 30 - Anthem PPO	\$237.84	\$913.86	\$683.01	\$1,341.39
HMO 30 - MetLife DHMO	\$220.47	\$866.60	\$637.74	\$1,296.12
DMHO 500 - Delta PPO	\$222.24	\$777.83	\$568.60	\$1,144.09
DHMO 500 - Delta Incentive*	\$222.02	\$777.03	\$567.80	\$1,143.29
DHMO 500 - Anthem PPO	\$218.02	\$762.47	\$553.24	\$1,128.73
DHMO 500 - MetLife DHMO	\$200.65	\$715.21	\$507.97	\$1,083.46

KAISER HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser HMO 20 - Delta PPO	\$233.78	\$938.25	\$790.64	\$1,302.09
Kaiser HMO 20 - Delta Incentive *	\$233.56	\$937.45	\$789.84	\$1,301.29
Kaiser HMO 20 - Anthem PPO	\$229.55	\$922.89	\$775.28	\$1,286.73
Kaiser HMO 20 - MetLife DHMO	\$212.18	\$875.63	\$730.01	\$1,241.46
Kaiser DHMO 500 - Delta PPO	\$200.55	\$672.47	\$549.05	\$939.69
Kaiser DHMO 500 - Delta Incentive *	\$200.33	\$671.67	\$548.25	\$938.89
Kaiser DHMO 500 - Anthem PPO	\$196.33	\$657.11	\$533.69	\$924.33
Kaiser DHMO 500 - MetLife DHMO	\$178.96	\$609.85	\$488.42	\$879.06
Kaiser HSA - Delta PPO	\$185.76	\$554.16	\$441.46	\$778.33
Kaiser HSA - Delta Incentive *	\$185.54	\$553.36	\$440.66	\$777.53
Kaiser HSA - Anthem PPO	\$181.54	\$538.80	\$426.10	\$762.97
Kaiser HSA - MetLife DHMO	\$164.16	\$491.54	\$380.83	\$717.70

ANTHEM PPO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
PPO 500 - Delta PPO	\$1,103.07	\$2,919.64	\$2,404.44	\$4,152.82
PPO 500 - Delta Incentive *	\$1,102.27	\$2,918.84	\$2,403.64	\$4,152.02
PPO 500 - Anthem PPO	\$1,087.71	\$2,904.28	\$2,389.08	\$4,137.46
PPO 500 - MetLife DHMO	\$1,024.53	\$2,857.02	\$2,343.81	\$4,092.19
PPO 750 - Delta PPO	\$932.75	\$2,561.97	\$2,097.87	\$3,650.38
PPO 750 - Delta Incentive *	\$931.95	\$2,561.17	\$2,097.07	\$3,649.58
PPO 750 - Anthem PPO	\$917.39	\$2,546.61	\$2,082.51	\$3,635.02
PPO 750 - MetLife DHMO	\$854.21	\$2,499.35	\$2,037.24	\$3,589.75
PPO ESS - Delta PPO	\$518.26	\$1,691.54	\$1,351.78	\$2,427.63
PPO ESS - Delta Incentive *	\$517.46	\$1,690.74	\$1,350.98	\$2,426.83
PPO ESS - Anthem PPO	\$502.90	\$1,676.18	\$1,336.42	\$2,412.27
PPO ESS - MetLife DHMO	\$439.72	\$1,628.92	\$1,291.15	\$2,367.00
PPO HSA - Delta PPO	\$344.83	\$1,327.34	\$1,039.61	\$1,916.02
PPO HSA -Delta Incentive *	\$344.03	\$1,326.54	\$1,038.81	\$1,915.22
PPO HSA - Anthem PPO	\$329.47	\$1,311.98	\$1,024.25	\$1,900.66
PPO HSA -MetLife DHMO	\$266.29	\$1,264.72	\$978.98	\$1,855.39

MINIMUM VALUE MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser MVP - Delta PPO	\$159.32	\$342.55	\$249.11	\$489.82
Kaiser MVP - Delta Incentive *	\$159.10	\$341.75	\$248.31	\$489.02
Kaiser MVP - Anthem PPO	\$155.09	\$327.19	\$233.75	\$474.46
Kaiser MVP - MetLife DHMO	\$137.72	\$279.93	\$188.48	\$429.19
PPO CHOICE MVP - Delta PPO	\$0.00	\$217.05	\$87.93	\$356.32
PPO CHOICE MVP - Delta Incentive *	\$0.00	\$216.25	\$87.13	\$355.52
PPO CHOICE MVP - Anthem PPO	\$0.00	\$201.69	\$72.57	\$340.96
PPO CHOICE MVP - MetLife DHMO	\$0.00	\$154.43	\$27.30	\$295.69

IMPORTANT: If you have 2 or more children on a METLIFE Dental Plan there is an additional cost of \$1.99 per month.
 *PLEASE NOTE: *Delta Incentive* is not available for new enrollments.



Medical, Dental, Vision And Term Life (please click here).
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Part Time Employees with EyeMed (27.5 Hour)

EMPLOYEE CONTRIBUTIONS 2023-2024

AMOUNTS LISTED ARE THE EMPLOYEES SHARE OF THE MONTHLY PREMIUM AND INCLUDE THE DISTRICT CONTRIBUTION; DEDUCTIONS INCLUDE MEDICAL, DENTAL, VISION AND GTL

ANTHEM HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
HMO 20 - Delta PPO	\$292.14	\$1,085.15	\$837.91	\$1,570.82
HMO 20 - Delta Incentive *	\$291.89	\$1,084.35	\$837.11	\$1,570.02
HMO 20 - Anthem PPO	\$287.34	\$1,069.79	\$822.55	\$1,555.46
HMO 20 - MetLife DHMO	\$267.60	\$1,022.53	\$777.28	\$1,510.19
HMO 30 - Delta PPO	\$275.08	\$970.47	\$739.62	\$1,409.72
HMO 30 - Delta Incentive *	\$274.83	\$969.67	\$738.82	\$1,408.92
HMO 30 - Anthem PPO	\$270.28	\$955.11	\$724.26	\$1,394.36
HMO 30 - MetLife DHMO	\$250.53	\$907.85	\$678.99	\$1,349.09
DMHO 500 - Delta PPO	\$252.55	\$819.08	\$609.85	\$1,197.06
DHMO 500 - Delta Incentive*	\$252.30	\$818.28	\$609.05	\$1,196.26
DHMO 500 - Anthem PPO	\$247.75	\$803.72	\$594.49	\$1,181.70
DHMO 500 - MetLife DHMO	\$228.01	\$756.46	\$549.22	\$1,136.43

KAISER HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser HMO 20 - Delta PPO	\$265.66	\$979.50	\$831.89	\$1,355.06
Kaiser HMO 20 - Delta Incentive *	\$265.41	\$978.70	\$831.09	\$1,354.26
Kaiser HMO 20 - Anthem PPO	\$260.86	\$964.14	\$816.53	\$1,339.70
Kaiser HMO 20 - MetLife DHMO	\$241.11	\$916.88	\$771.26	\$1,294.43
Kaiser DHMO 500 - Delta PPO	\$227.90	\$713.72	\$590.30	\$992.66
Kaiser DHMO 500 - Delta Incentive *	\$227.65	\$712.92	\$589.50	\$991.86
Kaiser DHMO 500 - Anthem PPO	\$223.10	\$698.36	\$574.94	\$977.30
Kaiser DHMO 500 - MetLife DHMO	\$203.36	\$651.10	\$529.67	\$932.03
Kaiser HSA - Delta PPO	\$211.09	\$595.41	\$482.71	\$831.30
Kaiser HSA - Delta Incentive *	\$210.84	\$594.61	\$481.91	\$830.50
Kaiser HSA - Anthem PPO	\$206.29	\$580.05	\$467.35	\$815.94
Kaiser HSA - MetLife DHMO	\$186.55	\$532.79	\$422.08	\$770.67

ANTHEM PPO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
PPO 500 - Delta PPO	\$1,140.57	\$2,960.89	\$2,445.69	\$4,205.79
PPO 500 - Delta Incentive *	\$1,139.77	\$2,960.09	\$2,444.89	\$4,204.99
PPO 500 - Anthem PPO	\$1,125.21	\$2,945.53	\$2,430.33	\$4,190.43
PPO 500 - MetLife DHMO	\$1,062.03	\$2,898.27	\$2,385.06	\$4,145.16
PPO 750 - Delta PPO	\$970.25	\$2,603.22	\$2,139.12	\$3,703.35
PPO 750 - Delta Incentive *	\$969.45	\$2,602.42	\$2,138.32	\$3,702.55
PPO 750 - Anthem PPO	\$954.89	\$2,587.86	\$2,123.76	\$3,687.99
PPO 750 - MetLife DHMO	\$891.71	\$2,540.60	\$2,078.49	\$3,642.72
PPO ESS - Delta PPO	\$555.76	\$1,732.79	\$1,393.03	\$2,480.60
PPO ESS - Delta Incentive *	\$554.96	\$1,731.99	\$1,392.23	\$2,479.80
PPO ESS - Anthem PPO	\$540.40	\$1,717.43	\$1,377.67	\$2,465.24
PPO ESS - MetLife DHMO	\$477.22	\$1,670.17	\$1,332.40	\$2,419.97
PPO HSA - Delta PPO	\$382.33	\$1,368.59	\$1,080.86	\$1,968.99
PPO HSA -Delta Incentive *	\$381.53	\$1,367.79	\$1,080.06	\$1,968.19
PPO HSA - Anthem PPO	\$366.97	\$1,353.23	\$1,065.50	\$1,953.63
PPO HSA -MetLife DHMO	\$303.79	\$1,305.97	\$1,020.23	\$1,908.36

MINIMUM VALUE MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser MVP - Delta PPO	\$181.04	\$383.80	\$290.36	\$542.79
Kaiser MVP - Delta Incentive *	\$180.79	\$383.00	\$289.56	\$541.99
Kaiser MVP - Anthem PPO	\$176.24	\$368.44	\$275.00	\$527.43
Kaiser MVP - MetLife DHMO	\$156.50	\$321.18	\$229.73	\$482.16
PPO CHOICE MVP - Delta PPO	\$0.00	\$258.30	\$129.18	\$409.29
PPO CHOICE MVP - Delta Incentive *	\$0.00	\$257.50	\$128.38	\$408.49
PPO CHOICE MVP - Anthem PPO	\$0.00	\$242.94	\$113.82	\$393.93
PPO CHOICE MVP - MetLife DHMO	\$0.00	\$195.68	\$68.55	\$348.66

IMPORTANT: If you have 2 or more children on a METLIFE Dental Plan there is an additional cost of \$1.99 per month.
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Part Time Employees with EyeMed (20 Hour)

EMPLOYEE CONTRIBUTIONS 2023-2024

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ANTHEM HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
HMO 20 - Delta PPO	\$467.43	\$1,291.40	\$1,044.16	\$1,835.66
HMO 20 - Delta Incentive *	\$467.03	\$1,290.60	\$1,043.36	\$1,834.86
HMO 20 - Anthem PPO	\$459.75	\$1,276.04	\$1,028.80	\$1,820.30
HMO 20 - MetLife DHMO	\$428.16	\$1,228.78	\$983.53	\$1,775.03
HMO 30 - Delta PPO	\$440.13	\$1,176.72	\$945.87	\$1,674.56
HMO 30 - Delta Incentive *	\$439.73	\$1,175.92	\$945.07	\$1,673.76
HMO 30 - Anthem PPO	\$432.45	\$1,161.36	\$930.51	\$1,659.20
HMO 30 - MetLife DHMO	\$400.86	\$1,114.10	\$885.24	\$1,613.93
DMHO 500 - Delta PPO	\$404.08	\$1,025.33	\$816.10	\$1,461.90
DHMO 500 - Delta Incentive*	\$403.68	\$1,024.53	\$815.30	\$1,461.10
DHMO 500 - Anthem PPO	\$396.40	\$1,009.97	\$800.74	\$1,446.54
DHMO 500 - MetLife DHMO	\$364.81	\$962.71	\$755.47	\$1,401.27

KAISER HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser HMO 20 - Delta PPO	\$425.05	\$1,185.75	\$1,038.14	\$1,619.90
Kaiser HMO 20 - Delta Incentive *	\$424.65	\$1,184.95	\$1,037.34	\$1,619.10
Kaiser HMO 20 - Anthem PPO	\$417.37	\$1,170.39	\$1,022.78	\$1,604.54
Kaiser HMO 20 - MetLife DHMO	\$385.78	\$1,123.13	\$977.51	\$1,559.27
Kaiser DHMO 500 - Delta PPO	\$364.65	\$919.97	\$796.55	\$1,257.50
Kaiser DHMO 500 - Delta Incentive *	\$364.25	\$919.17	\$795.75	\$1,256.70
Kaiser DHMO 500 - Anthem PPO	\$356.97	\$904.61	\$781.19	\$1,242.14
Kaiser DHMO 500 - MetLife DHMO	\$325.38	\$857.35	\$735.92	\$1,196.87
Kaiser HSA - Delta PPO	\$337.75	\$801.66	\$688.96	\$1,096.14
Kaiser HSA - Delta Incentive *	\$337.35	\$800.86	\$688.16	\$1,095.34
Kaiser HSA - Anthem PPO	\$330.07	\$786.30	\$673.60	\$1,080.78
Kaiser HSA - MetLife DHMO	\$298.48	\$739.04	\$628.33	\$1,035.51

ANTHEM PPO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
PPO 500 - Delta PPO	\$1,328.07	\$3,167.14	\$2,651.94	\$4,470.63
PPO 500 - Delta Incentive *	\$1,327.27	\$3,166.34	\$2,651.14	\$4,469.83
PPO 500 - Anthem PPO	\$1,312.71	\$3,151.78	\$2,636.58	\$4,455.27
PPO 500 - MetLife DHMO	\$1,249.53	\$3,104.52	\$2,591.31	\$4,410.00
PPO 750 - Delta PPO	\$1,157.75	\$2,809.47	\$2,345.37	\$3,968.19
PPO 750 - Delta Incentive *	\$1,156.95	\$2,808.67	\$2,344.57	\$3,967.39
PPO 750 - Anthem PPO	\$1,142.39	\$2,794.11	\$2,330.01	\$3,952.83
PPO 750 - MetLife DHMO	\$1,079.21	\$2,746.85	\$2,284.74	\$3,907.56
PPO ESS - Delta PPO	\$743.26	\$1,939.04	\$1,599.28	\$2,745.44
PPO ESS - Delta Incentive *	\$742.46	\$1,938.24	\$1,598.48	\$2,744.64
PPO ESS - Anthem PPO	\$727.90	\$1,923.68	\$1,583.92	\$2,730.08
PPO ESS - MetLife DHMO	\$664.72	\$1,876.42	\$1,538.65	\$2,684.81
PPO HSA - Delta PPO	\$569.83	\$1,574.84	\$1,287.11	\$2,233.83
PPO HSA -Delta Incentive *	\$569.03	\$1,574.04	\$1,286.31	\$2,233.03
PPO HSA - Anthem PPO	\$554.47	\$1,559.48	\$1,271.75	\$2,218.47
PPO HSA -MetLife DHMO	\$491.29	\$1,512.22	\$1,226.48	\$2,173.20

MINIMUM VALUE MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser MVP - Delta PPO	\$289.67	\$590.05	\$496.61	\$807.63
Kaiser MVP - Delta Incentive *	\$289.27	\$589.25	\$495.81	\$806.83
Kaiser MVP - Anthem PPO	\$281.99	\$574.69	\$481.25	\$792.27
Kaiser MVP - MetLife DHMO	\$250.40	\$527.43	\$435.98	\$747.00
PPO CHOICE MVP - Delta PPO	\$41.12	\$464.55	\$335.43	\$674.13
PPO CHOICE MVP - Delta Incentive *	\$40.32	\$463.75	\$334.63	\$673.33
PPO CHOICE MVP - Anthem PPO	\$25.76	\$449.19	\$320.07	\$658.77
PPO CHOICE MVP - MetLife DHMO	\$0.00	\$401.93	\$274.80	\$613.50

IMPORTANT: If you have 2 or more children on a METLIFE Dental Plan there is an additional cost of \$1.99 per month.

*PLEASE NOTE: *Delta Incentive* is not available for new enrollments.



Medical, Dental, Vision And Term Life (please click here).
To review Benefit Plan Summaries, please visit our page and select Health & Welfare dropdown.

For questions please contact benefits@msjc.edu

Part Time Employees with EyeMed (19 Hour)

EMPLOYEE CONTRIBUTIONS 2023-2024

AMOUNTS LISTED ARE THE EMPLOYEES SHARE OF THE MONTHLY PREMIUM AND INCLUDE THE DISTRICT CONTRIBUTION; DEDUCTIONS INCLUDE MEDICAL, DENTAL, VISION AND GTL

ANTHEM HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
HMO 20 - Delta PPO	\$490.80	\$1,318.90	\$1,071.66	\$1,870.97
HMO 20 - Delta Incentive *	\$490.38	\$1,318.10	\$1,070.86	\$1,870.17
HMO 20 - Anthem PPO	\$482.74	\$1,303.54	\$1,056.30	\$1,855.61
HMO 20 - MetLife DHMO	\$449.57	\$1,256.28	\$1,011.03	\$1,810.34
HMO 30 - Delta PPO	\$462.13	\$1,204.22	\$973.37	\$1,709.87
HMO 30 - Delta Incentive *	\$461.71	\$1,203.42	\$972.57	\$1,709.07
HMO 30 - Anthem PPO	\$454.07	\$1,188.86	\$958.01	\$1,694.51
HMO 30 - MetLife DHMO	\$420.90	\$1,141.60	\$912.74	\$1,649.24
DMHO 500 - Delta PPO	\$424.28	\$1,052.83	\$843.60	\$1,497.21
DHMO 500 - Delta Incentive*	\$423.86	\$1,052.03	\$842.80	\$1,496.41
DHMO 500 - Anthem PPO	\$416.22	\$1,037.47	\$828.24	\$1,481.85
DHMO 500 - MetLife DHMO	\$383.05	\$990.21	\$782.97	\$1,436.58

KAISER HMO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser HMO 20 - Delta PPO	\$446.30	\$1,213.25	\$1,065.64	\$1,655.21
Kaiser HMO 20 - Delta Incentive *	\$445.88	\$1,212.45	\$1,064.84	\$1,654.41
Kaiser HMO 20 - Anthem PPO	\$438.24	\$1,197.89	\$1,050.28	\$1,639.85
Kaiser HMO 20 - MetLife DHMO	\$405.07	\$1,150.63	\$1,005.01	\$1,594.58
Kaiser DHMO 500 - Delta PPO	\$382.88	\$947.47	\$824.05	\$1,292.81
Kaiser DHMO 500 - Delta Incentive *	\$382.46	\$946.67	\$823.25	\$1,292.01
Kaiser DHMO 500 - Anthem PPO	\$374.81	\$932.11	\$808.69	\$1,277.45
Kaiser DHMO 500 - MetLife DHMO	\$341.64	\$884.85	\$763.42	\$1,232.18
Kaiser HSA - Delta PPO	\$354.64	\$829.16	\$716.46	\$1,131.45
Kaiser HSA - Delta Incentive *	\$354.22	\$828.36	\$715.66	\$1,130.65
Kaiser HSA - Anthem PPO	\$346.57	\$813.80	\$701.10	\$1,116.09
Kaiser HSA - MetLife DHMO	\$313.40	\$766.54	\$655.83	\$1,070.82

ANTHEM PPO MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
PPO 500 - Delta PPO	\$1,353.07	\$3,194.64	\$2,679.44	\$4,505.94
PPO 500 - Delta Incentive *	\$1,352.27	\$3,193.84	\$2,678.64	\$4,505.14
PPO 500 - Anthem PPO	\$1,337.71	\$3,179.28	\$2,664.08	\$4,490.58
PPO 500 - MetLife DHMO	\$1,274.53	\$3,132.02	\$2,618.81	\$4,445.31
PPO 750 - Delta PPO	\$1,182.75	\$2,836.97	\$2,372.87	\$4,003.50
PPO 750 - Delta Incentive *	\$1,181.95	\$2,836.17	\$2,372.07	\$4,002.70
PPO 750 - Anthem PPO	\$1,167.39	\$2,821.61	\$2,357.51	\$3,988.14
PPO 750 - MetLife DHMO	\$1,104.21	\$2,774.35	\$2,312.24	\$3,942.87
PPO ESS - Delta PPO	\$768.26	\$1,966.54	\$1,626.78	\$2,780.75
PPO ESS - Delta Incentive *	\$767.46	\$1,965.74	\$1,625.98	\$2,779.95
PPO ESS - Anthem PPO	\$752.90	\$1,951.18	\$1,611.42	\$2,765.39
PPO ESS - MetLife DHMO	\$689.72	\$1,903.92	\$1,566.15	\$2,720.12
PPO HSA - Delta PPO	\$594.83	\$1,602.34	\$1,314.61	\$2,269.14
PPO HSA -Delta Incentive *	\$594.03	\$1,601.54	\$1,313.81	\$2,268.34
PPO HSA - Anthem PPO	\$579.47	\$1,586.98	\$1,299.25	\$2,253.78
PPO HSA -MetLife DHMO	\$516.29	\$1,539.72	\$1,253.98	\$2,208.51

MINIMUM VALUE MEDICAL PLANS				
Medical Plan - Dental Plan Combination	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Kaiser MVP - Delta PPO	\$304.15	\$617.55	\$524.11	\$842.94
Kaiser MVP - Delta Incentive *	\$303.73	\$616.75	\$523.31	\$842.14
Kaiser MVP - Anthem PPO	\$296.08	\$602.19	\$508.75	\$827.58
Kaiser MVP - MetLife DHMO	\$262.91	\$554.93	\$463.48	\$782.31
PPO CHOICE MVP - Delta PPO	\$66.12	\$492.05	\$362.93	\$709.44
PPO CHOICE MVP - Delta Incentive *	\$65.32	\$491.25	\$362.13	\$708.64
PPO CHOICE MVP - Anthem PPO	\$50.76	\$476.69	\$347.57	\$694.08
PPO CHOICE MVP - MetLife DHMO	\$0.00	\$429.43	\$302.30	\$648.81

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