

PETALUMA CITY SCHOOLS
2026/2027 CLASSIFIED EMPLOYEE MONTHLY PREMIUMS
 Effective 10/1/26 - 9/30/27



COMPOSITE RATES	HIGH	MID	LOW
Single, Double, Family	\$2,680.00	\$2,368.00	\$1,735.00
Cost to FT Employee	(\$1,489.87 over Cap)	(\$1,177.87 over Cap)	(\$544.87 over Cap)

*Kaiser High & Mid - Includes Chiropractic and Vision

**Kaiser Low - No Chiropractic or Vision (Vision available through Vision Service Plan)



COMPOSITE RATES	90%	80%	HIGH DEDUCTIBLE	WABE
Single, Double, Family	\$2,413.00	\$2,119.00	\$1,600.00	\$892.00
Cost to FT Employee	(\$1,222.87 over Cap)	(\$928.87 over Cap)	(\$409.87 over Cap)	(\$0 over Cap)

BLUE SHIELD ANCHOR BRONZE (MINIMUM VALUE PLAN - TIERED RATES)	
Single (Employee Only)	\$892.00
Cost to FT Employee	(\$0 over Cap)
Employee + Child(ren)	\$1,421.00
Cost to FT Employee	(\$230.87 over Cap)

*Coverage available for Employee OR Employee + Child(ren) only

**Spouses / Domestic Partners are not eligible for this plan



COMPOSITE RATES		COMPOSITE RATES	
Single, Double, Family	\$111.00	Single	\$29.00
Cost to FT Employee	(\$0 over Cap)	Cost to FT Employee	(\$0 over Cap)



LIFE INSURANCE
\$5.33 per Month
<i>*100% of premium paid in full for the following: Classified - 6 hours per day / Certificated - .75 FTE to 1.0 FTE</i>

DISTRICT CAP
\$1,190.13 per Month – Full Time Employees
<i>*Part-Time Employees are prorated.</i>