

2020 Medical Premium Contribution Rates: Employee Only

CLASSIFIED YEAR-ROUND EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 26 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay
Consolidated Crafts ¹								
Electric Workers Local 6	\$325.81	\$22.03	\$325.81	\$85.82	\$298.02	\$0	\$325.81	\$221.16
Stationary Engineers Local 39								
Laborers, Local 261								
SEIU Local 1021	\$325.81	\$22.03	\$325.81	\$85.82	\$298.02	\$0	\$355.90	\$191.07
Classified Unrepresented								
Classified Unrepresented Managerial	\$325.81	\$22.03	\$325.81	\$85.82	\$298.02	\$0	\$325.81	\$221.16
IFPTE Local 21	\$325.81	\$22.03	\$325.81	\$85.82	\$298.02	\$0	\$325.81	\$221.16
UESF Paraeducators (Year-round)								
UESF 15–19 hours Paraeducators					\$223.52	\$74.50		
K-12 SCHOOL TERM EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 22 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay
UESF and USP K-12 Paraeducators August–December	\$325.81	\$22.03	\$325.81	\$85.82	\$298.02	\$0	\$325.81	\$221.16
UESF and USP K-12 Paraeducators January–June ²	\$434.41	\$29.37	\$434.41	\$114.43	\$397.36	\$0	\$434.41	\$294.88
K-12 SCHOOL TERM EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 23 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay
SEIU Local 1021 K-12 Classified August–December	\$325.81	\$22.03	\$325.81	\$85.82	\$298.02	\$0	\$355.90	\$191.07
SEIU Local 1021 K-12 Classified January–June ²	\$401.00	\$27.11	\$401.00	\$105.62	\$366.79	\$0	\$438.03	\$235.16
SEIU Local 1021 PEX Student Nutrition Workers less than 20 hours a week August–December					\$298.02	\$0		
SEIU Local 1021 PEX Student Nutrition Workers less than 20 hours a week January–June ²					\$366.79	\$0		
PRE-K SCHOOL TERM EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 24 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay
UESF and USP Paraeducators August–December	\$325.81	\$22.03	\$325.81	\$85.82	\$298.02	\$0	\$325.81	\$221.16
UESF and USP Paraeducators January–June ²	\$372.35	\$25.18	\$372.35	\$98.08	\$340.59	\$0	\$372.35	\$252.75
CERTIFICATED EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Monthly - 12 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay
UASF Local 3 Administrators								
Board of Educators (BOE)								
Superintendent's Cabinet	\$705.92	\$47.74	\$705.92	\$185.96	\$645.71	\$0	\$705.92	\$479.19
Certificated Unrepresented Management								
UESF Certificated Personnel								
UESF Substitute Teachers (Prop A)								

¹ Consolidated Crafts includes: Machinists Local 1414, Carpenters Local 22, Glaziers Local 718, Ironworkers Local 377, Painters Local 1176, Plasterers Local 66, Plumbers & Pipefitters Local 38, Roofers Local 40, Sheet Metal Workers Local 104, Teamsters Local 853.

² Rates are higher from January through June to fund coverage during the summer months. See pages 25-28 for Health Coverage Calendars.

Please note that access to plan options for some employees may be limited based on SFUSD's implementation of the Affordable Care Act in 2017. If you are impacted, you will receive separate communication in advance of Open Enrollment.

2020 Medical Premium Contribution Rates: Employee +1

CLASSIFIED YEAR-ROUND EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 26 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay
Consolidated Crafts ¹								
Electric Workers Local 6	\$672.37	\$22.03	\$732.95	\$89.04	\$594.67	\$0	\$732.95	\$326.28
Stationary Engineers Local 39								
Laborers, Local 261								
SEIU Local 1021	\$672.37	\$22.03	\$732.95	\$89.04	\$594.67	\$0	\$732.95	\$326.28
Board Designated Confidential or Unrepresented								
Board Designated Managerial	\$452.14	\$242.26	\$452.14	\$369.85	\$424.35	\$170.32	\$452.14	\$607.09
IFPTE Local 21	\$429.66	\$264.74	\$429.66	\$392.33	\$401.87	\$192.80	\$429.66	\$629.57
UESF Paraeducators (Year-round)	\$452.14	\$242.26	\$452.14	\$369.85	\$424.35	\$170.32	\$452.14	\$607.09
UESF 15–19 hours Paraeducators								
K-12 SCHOOL TERM EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 22 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay
UESF and USP K-12 Paraeducators August–December	\$452.14	\$242.26	\$452.14	\$369.85	\$424.35	\$170.32	\$452.14	\$607.09
UESF and USP K-12 Paraeducators January–June ²	\$602.85	\$323.01	\$602.85	\$493.13	\$565.80	\$227.09	\$602.85	\$809.45
K-12 SCHOOL TERM EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 23 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay
SEIU Local 1021 K-12 Classified August–December	\$672.37	\$22.03	\$732.95	\$89.04	\$594.67	\$0	\$732.95	\$326.28
SEIU Local 1021 K-12 Classified January–June ²	\$827.53	\$27.11	\$902.09	\$109.59	\$731.90	\$0	\$902.09	\$401.58
SEIU Local 1021 PEX Student Nutrition Workers less than 20 hours a week August–December								
SEIU Local 1021 PEX Student Nutrition Workers less than 20 hours a week January–June ²								
PRE-K SCHOOL TERM EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 24 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay
UESF and USP Paraeducators August–December	\$452.14	\$242.26	\$452.14	\$369.85	\$424.35	\$170.32	\$452.14	\$607.09
UESF and USP Paraeducators January–June ²	\$516.73	\$276.87	\$516.73	\$422.69	\$484.97	\$194.65	\$516.73	\$693.82
CERTIFICATED EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Monthly - 12 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay	SFUSD Pays	You Pay
UASF Local 3 Administrators								
Board of Educators (BOE)	\$929.64	\$574.89	\$929.64	\$851.34	\$869.43	\$419.02	\$929.64	\$1,365.37
Superintendent's Cabinet								
Certificated Unrepresented Management								
UESF Certified Personnel	\$929.64	\$524.89	\$979.64	\$801.34	\$919.43	\$369.02	\$979.64	\$1,315.37
UESF Substitute Teachers (Prop A)								

¹ Consolidated Crafts includes: Machinists Local 1414, Carpenters Local 22, Glaziers Local 718, Ironworkers Local 377, Painters Local 1176, Plasterers Local 66, Plumbers & Pipefitters Local 38, Roofers Local 40, Sheet Metal Workers Local 104, Teamsters Local 853.

² Rates are higher from January through June to fund coverage during the summer months. See pages 25-28 for Health Coverage Calendars.

Please note that access to plan options for some employees may be limited based on SFUSD's implementation of the Affordable Care Act in 2017. If you are impacted, you will receive separate communication in advance of Open Enrollment.

2020 Medical Premium Contribution Rates: Employee +2 or More

CLASSIFIED YEAR-ROUND EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 26 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay				
Consolidated Crafts ¹								
Electric Workers Local 6	\$732.95	\$249.07	\$732.95	\$429.61	\$705.16	\$135.72	\$732.95	\$758.84
Stationary Engineers Local 39								
Laborers, Local 261								
SEIU Local 1021	\$732.95	\$249.07	\$732.95	\$429.61	\$705.16	\$135.72	\$732.95	\$758.84
Board Designated Confidential or Unrepresented								
Board Designated Managerial	\$498.30	\$483.72	\$498.30	\$664.26	\$470.51	\$370.37	\$498.30	\$993.49
IFPTE Local 21	\$484.58	\$497.44	\$484.58	\$677.98	\$456.79	\$384.09	\$484.58	\$1,007.21
UESF Paraeducators (Year-round)	\$498.30	\$483.72	\$498.30	\$664.26	\$470.51	\$370.37	\$498.30	\$993.49
UESF 15–19 hours Paraeducators								

K-12 SCHOOL TERM EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 22 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay				
UESF and USP K-12 Paraeducators August–December	\$498.30	\$483.72	\$498.30	\$664.26	\$470.51	\$370.37	\$498.30	\$993.49
UESF and USP K-12 Paraeducators January–June ²	\$664.40	\$644.96	\$664.40	\$885.68	\$627.35	\$493.83	\$664.40	\$1,324.65

K-12 SCHOOL TERM EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 23 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay				
SEIU Local 1021 K-12 Classified August–December	\$732.95	\$249.07	\$732.95	\$429.61	\$705.16	\$135.72	\$732.95	\$758.84
SEIU Local 1021 K-12 Classified January–June ²	\$902.09	\$306.55	\$902.09	\$528.75	\$867.89	\$167.04	\$902.09	\$933.96
SEIU Local 1021 PEX Student Nutrition Workers less than 20 hours a week August–December								
SEIU Local 1021 PEX Student Nutrition Workers less than 20 hours a week January–June ²								

PRE-K SCHOOL TERM EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Biweekly - 24 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay				
UESF and USP Paraeducators August–December	\$498.30	\$483.72	\$498.30	\$664.26	\$470.51	\$370.37	\$498.30	\$993.49
UESF and USP Paraeducators January–June ²	\$569.49	\$552.82	\$569.49	\$759.15	\$537.73	\$423.28	\$569.49	\$1,135.42

CERTIFICATED EMPLOYEES	BLUE SHIELD OF CALIFORNIA				KAISER PERMANENTE HMO		UHC PPO (City Plan)	
	TRIO HMO		ACCESS+ HMO		SFUSD Pays	You Pay	SFUSD Pays	You Pay
Monthly - 12 Pay Period Deductions	SFUSD Pays	You Pay	SFUSD Pays	You Pay				
UASF Local 3 Administrators								
Board of Educators (BOE)	\$979.64	\$1,148.08	\$979.64	\$1,539.25	\$919.43	\$902.47	\$979.64	\$2,252.57
Superintendent's Cabinet								
Certificated Unrepresented Management								
UESF Certificated Personnel	\$1,079.64	\$1,048.08	\$1,079.64	\$1,439.25	\$1,019.43	\$802.47	\$1,079.64	\$2,152.57
UESF Substitute Teachers (Prop A)								

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² Rates are higher from January through June to fund coverage during the summer months. See pages 25-28 for Health Coverage Calendars.

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Vision Plan Benefits-at-a-Glance

Covered Services	VSP Basic ¹	VSP Premier		
Well Vision Exam	\$10 co-pay every calendar year	\$10 co-pay every calendar year		
Single Vision Lenses	\$25 co-pay every other calendar year ²	\$0 every calendar year		
Lined Bifocal Lenses	\$25 co-pay every other calendar year ²	\$0 every calendar year		
Lined Trifocal Lenses	\$25 co-pay every other calendar year ²	\$0 every calendar year		
Standard Progressive Lenses	100% coverage every other calendar year	100% coverage every calendar year		
Premium Progressive Lenses	\$95–\$105 co-pay every other calendar year	\$25 co-pay every calendar year		
Custom Progressive Lenses	\$150–\$175 co-pay every other calendar year	\$25 co-pay every calendar year		
Standard Anti-Reflective Coating	\$41 co-pay every other calendar year	\$25 co-pay every calendar year		
Premium Anti-Reflective Coating	\$58–\$69 co-pay every other calendar year	\$25 co-pay every calendar year		
Custom Anti-Reflective Coating	\$85 co-pay every other calendar year	\$25 co-pay every calendar year		
Scratch-Resistant Coating	Fully covered every other calendar year	Fully Covered every calendar year		
Frames	\$150 allowance for a wide selection of frames \$170 allowance for featured frames \$80 allowance use at Costco® \$25 co-pay applies; 20% savings on amount over the allowance; every other calendar year	\$300 allowance for a wide selection of frames \$320 allowance for featured frames \$165 allowance at Costco® No additional co-pay; 20% savings on the amount over your allowance every calendar year		
Contacts (instead of glasses)	\$150 allowance every other calendar year ²	\$250 allowance every calendar year		
Contact Lens Exam	Up to \$60 co-pay every other calendar year ²	Up to \$60 co-pay every other calendar year		
Primary Eye Care (for the treatment of urgent or acute ocular conditions)	\$5 co-pay	\$5 co-pay		
Vision Care Discounts				
Laser Vision Correction	Average 15% off regular price or 5% off promotional price; discounts only available from contracted facilities	Average 15% off regular price or 5% off promotional price; discounts only available from contracted facilities		
VSP Premier Contribution				
Biweekly (26 Pay Periods)	Monthly (12 months)	22 Pay Periods ³	23 Pay Periods ³	24 Pay Periods ³
E Only \$4.58 E + 1 Dep. \$6.91 E + 2 or more \$14.34	E Only \$9.93 E + 1 Dep. \$14.98 E + 2 or more \$31.06	E Only \$6.11 \$4.58 E + 1 Dep. \$9.22 \$6.91 E + 2 or more \$19.11 \$14.34	E Only \$5.64 \$4.58 E + 1 Dep. \$8.51 \$6.91 E + 2 or more \$17.64 \$14.34	E Only \$5.24 \$4.58 E + 1 Dep. \$7.90 \$6.91 E + 2 or more \$16.38 \$14.34
Your Coverage with Out-of-Network Providers				
Visit vsp.com if you plan to see a provider other than a VSP network provider.				
Exam Up to \$50 Frame Up to \$70	Single Vision Lenses Up to \$45 Lined Bifocal Lenses Up to \$65	Lined Trifocal Lenses Up to \$85 Progressive Lenses Up to \$85	Contacts Up to \$105	

¹VSP Basic Plan coverage is included with your medical premium.

²Under the VSP Basic plan, new lenses may be covered the next year if Rx change is more than .50 diopters.

³Employees with 22, 23 and 24 pay periods pay a pro-rated premium rate for VSP Premier before summer break.

IFPTE Local 21, SEIU 1021 and miscellaneous unrepresented employees are also eligible for VDT Computer VisionCare benefits. In any instance where information in this chart conflicts with the plan's Evidence of Coverage (EOC), the plan's EOC shall prevail.