

**SAN DIEGO COUNTY OFFICE OF EDUCATION
EMPLOYEE PREMIUM SHARE OF COST
2021 PLAN YEAR**

10 PAY AND 11 PAY EMPLOYEES

<u>Medical Plan</u>	<u>Employee Monthly Premium</u>
Kaiser Permanente (All tiers)	\$87.65
United Healthcare Performance HMO	
Network 1	
Employee Only	\$87.65
Employee + 1	\$120.74
Employee + Family	\$838.74
Network 2	
Employee Only	\$87.65
Employee + 1	\$675.74
Employee + Family	\$1620.74
United Healthcare Alliance HMO	
Employee Only	\$87.65
Employee + 1	\$190.74
Employee + Family	\$927.74
United Healthcare Harmony HMO	
Employee Only	\$87.65
Employee + 1	\$87.65
Employee + Family	\$656.34
United Healthcare Journey HMO	
Employee Only	\$87.65
Employee + 1	\$87.65
Employee + Family	\$433.14