

CALIFORNIA'S VALUED TRUST (CVT) 2018/19 PLAN YEAR RATES ACTIVE EMPLOYEES

	<u>Composite Rates</u> 10 Months	<u>Composite Rates</u> 11 Months	<u>Composite Rates</u> 12 Months
Wellness 1	\$500 Individual Deductible 90/10 Co-insurance		
Monthly Premium	\$ 957.06	\$ 870.06	\$ 797.55
Plan #7C	\$250 Deductible 80/20 Co-insurance		
Monthly Premium	\$ 893.46	\$ 812.24	\$ 744.55
Plan #8C	\$500 Deductible 80/20 Co-insurance		
Monthly Premium	\$ 730.26	\$ 663.88	\$ 608.55
Plan #9C	\$1000 Deductible 80/20 Co-insurance		
Monthly Premium	\$ 544.26	\$ 494.79	\$ 453.55
Plan #10C	\$2000 Deductible 80/20 Co-insurance		
Monthly Premium	\$ 336.66	\$ 306.06	\$ 280.55
Plan # HDHP-1	\$1300 Deductible/\$2700 Family Deductible 90/10 Co-insurance		
Monthly Premium	\$ 325.86	\$ 296.24	\$ 271.55
Bronze Plan	\$5000 Ind. Deductible/\$10,000 Family Deductible 70/30 Co-insurance		
Monthly Premium	\$ 105.06	\$ 95.51	\$ 87.55
I am Choosing:			
My Plan Choice	# of Checks to Deduct Premium		
<i>*NOTE: If you would like your premiums deducted on a pre-tax basis you must do so in the number of service months you work regardless of the number of paychecks you receive.</i>			

Printed Name

Signature

Date