

**Employee Premium Calculations for Full Family Coverage:**

**Consolidated Plan: Calculations for Full Family Coverage**

|  | 1.0 FTE         | 0.75 FTE        | 0.5 FTE         |
|--|-----------------|-----------------|-----------------|
| Full time EE state allocation                          | \$768.00        | \$768.00        | \$768.00        |
| Allocation from state based on FTE                     | \$768.00        | \$576.00        | \$384.00        |
| Premium for Least Expensive PEBB CDHP Plan             | \$1,269.42      | \$1,269.42      | \$1,269.42      |
| District's premium share at 65% of prorated allocation | \$825.12        | \$618.84        | \$412.56        |
| <b>EE Share, consolidated plan, full family</b>        | <b>\$444.30</b> | <b>\$650.58</b> | <b>\$856.86</b> |

**Current Seattle Public Schools Plan: Calculations for Full Family Coverage**

|   | 1.0 FTE         | 0.75 FTE        | 0.5 FTE         |
|---|-----------------|-----------------|-----------------|
| EE state allocation                                   | \$768.00        | \$576.00        | \$384.00        |
| Allocation from SPS after pooling based on FTE        | \$829.00        | \$621.75        | \$414.50        |
| Premium for Least Expensive SPS \$500 Deductible Plan | \$1,035.59      | \$1,035.59      | \$1,035.59      |
| Premium for Dental, Vision, Life and LTD              | \$143.00        | \$143.00        | \$143.00        |
| <b>EE Share, SPS plan, full family</b>                | <b>\$349.59</b> | <b>\$556.84</b> | <b>\$764.09</b> |

**Employee Premium Calculations for Employee with Children Coverage:**

**Consolidated Plan: Calculations for Employee and Children Coverage**

|  | 1.0 FTE             | 0.75 FTE        | 0.5 FTE         |
|--|---------------------|-----------------|-----------------|
| Full time EE state allocation                          | \$768.00            | \$768.00        | \$768.00        |
| Allocation from state based on FTE                     | \$768.00            | \$576.00        | \$384.00        |
| Premium for Least Expensive PEBB CDHP Plan             | \$853.32            | \$853.32        | \$853.32        |
| District's premium share at 65% of prorated allocation | \$554.66            | \$415.99        | \$277.33        |
| <b>EE Share, consolidated plan, EE &amp; CH</b>        | <b>\$298.66 - 3</b> | <b>\$437.33</b> | <b>\$575.99</b> |

**Current Seattle Public Schools Plan: Calculations for Employee and Children Coverage**

|   | 1.0 FTE       | 0.75 FTE        | 0.5 FTE         |
|---|---------------|-----------------|-----------------|
| EE state allocation                                   | \$768.00      | \$576.00        | \$384.00        |
| Allocation from SPS after pooling based on FTE        | \$829.00      | \$621.75        | \$414.50        |
| Premium for Least Expensive SPS \$500 Deductible Plan | \$619.24      | \$619.24        | \$619.24        |
| Premium for Dental, Vision, Life and LTD              | \$143.00      | \$143.00        | \$143.00        |
| <b>EE Share, SPS plan, EE &amp; CH</b>                | <b>\$0.00</b> | <b>\$140.49</b> | <b>\$347.74</b> |

1

2

**"JANE DOE" SINGLE MOM - 2 KIDS - 6hrs PER DAY**

Currently "**Jane**" pays **\$0** per month for the Group Health Deductible plan at SSD.  
That is figure #1.

If she was a member of the **SEA** and had her benefits pro-rated, she would pay between **\$140.49** and **\$347.74** (#2) each month which is why we have never agreed to pro-rated benefits at SSD.

Now, **if** we were "consolidated" into one big government contraption in Olympia such as the "**BAD**" bills (SB 6442 & HB 2724) propose, she would have to pay **\$298.66** per month (figure # 3) each month for roughly the same benefit. **SHE COULD NOT AFFORD INSURANCE under those circumstances.**

**Make no mistake about it; these proposals would impact every single one of us negatively.**