

Woodland Joint Unified School District

Benefit Rate Sheet Effective 1/1/2026 Certificated Adult Education Employees

Rates listed are monthly rates

		Western Health Advantage Monthly Premium Cost			Kaiser Permanente Monthly Premium Cost		
	High Option	Low Option #1	Low Option #2	High Option	Low Option #1	Low Option #2 w or w/o banking	
Employee	\$1,204.22	\$902.67	\$829.26	\$1,181.54	\$911.01	\$889.19	
Employee + One	\$1,979.83	\$1,483.06	\$1,361.97	\$1,949.54	\$1,503.17	\$1,467.16	
Employee + Family	\$2,636.23	\$1,974.24	\$1,812.78	\$2,599.39	\$2,004.22	\$1,956.22	
			Sutter Health Plus High Plan Monthly Premium Cost				
Employee			\$1,393.10				
Employee + One			\$2,301.30				
Employee + Family			\$3,068.40				
	Delta i	Delta Dental Incentive Monthly Premium Cost			Delta Dental Alternative Monthly Premium Cost		
Employee		\$67.23			\$61.99		
Employee + One		\$127.75			\$117.79		
Employee + Family		\$194.98			\$179.79		
	M	VSP Classic Monthly Premium Cost			VSP Enhanced Monthly Premium Cost		
Employee		\$6.78			\$8.24		
Employee + One		\$13.54			\$16.45		
Employee + Family		\$20.28			\$24.64		

WOODLAND JOINT UNIFIED SCHOOL DISTRICT MAY CONTRIBUTE UP TO \$613.43 PER MONTH

Additional plan an information is available on the WJUSD website at https://www.wjusd.org/Departments/Business/Benefits/index.html or at the district office located at 435 Sixth Street, Woodland CA 95695