



Bonita Unified School District

2025 / 2026 BENEFITS COMPARISON RATES

The District will contribute \$1,400 tenthly towards benefits for full time employees. Pro-rated for part time.

MEDICAL	SINGLE		2-PARTY		FAMILY		Change
	2025	2026	2025	2026	2025	2026	%
Anthem HMO Select	\$1,100.26	\$1,155.22	\$2,200.51	\$2,310.43	\$2,860.67	\$3,003.56	5.00%
Anthem Traditional HMO	\$1,278.55	\$1,354.24	\$2,557.10	\$2,708.47	\$3,324.24	\$3,521.02	5.92%
Blue Shield Access + HMO	\$994.18	\$1,101.49	\$1,988.35	\$2,202.98	\$2,584.86	\$2,863.88	10.79%
Blue Shield TRIO ACO	\$885.73	\$1,023.07	\$1,771.46	\$2,046.14	\$2,302.91	\$2,659.99	15.51%
Health Net Salud y Mas HMO	\$857.28	\$888.13	\$1,714.56	\$1,776.26	\$2,228.93	\$2,309.15	3.60%
Kaiser HMO	\$1,111.82	\$1,162.86	\$2,223.65	\$2,325.72	\$2,890.74	\$3,023.44	4.59%
United Healthcare HMO	\$1,039.68	\$1,044.91	\$2,079.36	\$2,089.82	\$2,703.17	\$2,716.78	0.50%
United Healthcare Harmony	\$907.54	\$918.61	\$1,815.07	\$1,837.22	\$2,359.60	\$2,388.40	1.22%
PERS Gold PPO 80/20	\$1,041.78	\$1,152.04	\$2,083.56	\$2,304.07	\$2,708.63	\$2,995.30	10.58%
PERS Platinum PPO 90/10	\$1,516.48	\$1,718.17	\$3,032.95	\$3,436.34	\$3,942.84	\$4,467.25	13.30%

DENTAL	SINGLE		2-PARTY		FAMILY		Change
Delta Dental PPO	\$69.91	\$69.91	\$143.37	\$143.37	\$206.58	\$206.58	0.00%
Delta Dental PPO <i>w/Ortho</i>	\$78.19	\$78.19	\$160.32	\$160.32	\$231.00	\$231.00	0.00%
Delta Dental PPO Max	76.06	\$76.06	\$155.98	\$155.98	\$224.76	\$224.76	0.00%
Delta Dental PPO Max <i>w/Ortho</i>	\$84.45	\$84.45	\$173.15	\$173.15	\$249.48	\$249.48	0.00%
Delta Care HMO	\$25.35	\$25.35	\$46.03	\$46.03	\$76.65	\$76.65	0.00%

VISION	SINGLE		2-PARTY		FAMILY		Change
Vision Service Plan - VSP	\$9.76	\$9.37	\$19.74	\$18.95	\$28.64	\$27.49	-4.0%

Rates represent amounts based on a 10 month payroll deduction plan for 12 months of continuous coverage.