



2025-26 HEALTH INSURANCE PLANS – BCTA
EMPLOYEE COST – Effective July 1, 2026 – September 30, 2026
***Employee monthly cost based on 12-month assignment**

HUMAN RESOURCES
 530-532-5765
 Fax 530-532-5787

BCOE Medical Cap Contribution: \$1,430.00
BCOE Dental Cap Contribution: \$109.00
BCOE Vision Cap Contribution: \$19.00

2025-26 Anthem Medical Plans

Plan Description	Employee Monthly Cost	Both Spouses Enrolled in SISC Coverage 25% premium discount
80% G \$30	\$2,119 less cap = \$689/month	-\$530 discount \$1,589 less cap = \$159/month
80% J \$30	\$1,925 less cap = \$495/month	-\$481 discount \$1,444 less cap = \$14/month
80% M \$40	\$1,573 less cap = \$143/month	-\$393 discount \$1,180 less cap = \$250 rebate/month
HSA \$1700	\$1,826 less cap = \$396/month	-\$457 discount \$1,369 less cap = \$61/month
HSA \$5000	\$1,305 less cap = \$125/month	-\$326 discount \$979 less cap = \$451 rebate/month
MEC \$9000	\$1,234 less cap = \$196 rebate/month	-\$309 discount \$925 less cap = \$505 rebate/month

2025-26 Kaiser Medical Plan

Traditional HMO \$30	\$2,083 less cap = \$653/month	-\$521 discount \$1,562 less cap = \$132/month
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2025-26 Delta Dental Plans

PPO Plan 1 - No Ortho	\$69 less cap = \$40 rebate/month
PPO Plan 8 – No Ortho	\$115 less cap = \$6/month
PPO Plan 10 – Includes Ortho	\$124 less cap = \$15/month
PPO Plan 12 - Includes Ortho	\$145 less cap = \$36/month

2025-26 Vision Plans

Plan 4 - \$10 Copay - Frames – 1 per 24 months	\$19 total premium less cap = \$0/month
Plan 4X - \$10 Copay w/Contacts - Frames – 1 per 24 months	\$32 total premium less cap = \$13/month
Plan 8 - \$10 Copay - Frames – 1 per 12 months	\$29 total premium less cap = \$10/month
Plan 8X - \$0 Copay w/Contacts - Frames – 1 per 12 months	\$42 total premium less cap = \$23/month