

2023 Medical Plan Per-Pay-Period Contributions – Non-Rep

	Employee Per-Pay-Period Contribution	Hospital Per-Pay-Period Contribution
Stanford Health Care Alliance Plan – If your hourly rate* is \$39.28 or less:		
Employee	\$0.00	\$737.47
Employee + Spouse	\$0.00	\$1,614.45
Employee + Child(ren)	\$0.00	\$1,326.95
Employee + Family	\$0.00	\$2,203.93
Stanford Health Care Alliance Plan – If your hourly rate* is \$39.29 or more:		
Employee	\$34.16	\$703.31
Employee + Spouse	\$148.29	\$1,466.16
Employee + Child(ren)	\$62.63	\$1,264.32
Employee + Family	\$176.94	\$2,026.99
Aetna Choice POS II Plan – If your hourly rate* is \$39.28 or less:		
Employee	\$0.00	\$641.88
Employee + Spouse	\$0.00	\$1,405.50
Employee + Child(ren)	\$0.00	\$1,155.33
Employee + Family	\$0.00	\$1,918.97
Aetna Choice POS II Plan – If your hourly rate* is \$39.29 or more, but less than \$50.00:		
Employee	\$0.00	\$641.88
Employee + Spouse	\$76.69	\$1,328.81
Employee + Child(ren)	\$0.00	\$1,155.33
Employee + Family	\$76.69	\$1,842.28
Aetna Choice POS II Plan – If your hourly rate* is \$50.00 or more:		
Employee	\$0.00	\$641.88
Employee + Spouse	\$153.38	\$1,252.12
Employee + Child(ren)	\$0.00	\$1,155.33
Employee + Family	\$153.38	\$1,765.59
Kaiser Permanente HMO Plan – If your hourly rate* is \$39.28 or less:		
Employee	\$0.00	\$368.14
Employee + Spouse	\$0.00	\$827.82
Employee + Child(ren)	\$0.00	\$626.19
Employee + Family	\$0.00	\$1,085.87
Kaiser Permanente HMO Plan – If your hourly rate* is \$39.29 or more:		
Employee	\$51.97	\$316.17
Employee + Spouse	\$187.31	\$640.51
Employee + Child(ren)	\$88.39	\$537.80
Employee + Family	\$223.52	\$862.35

* Your hourly rate as of September 5, 2022.

Imputed income will be assessed if you are covering an eligible domestic partner under your health benefits. If your domestic partner and their children do not satisfy the IRS definition of a qualifying child or relative, the fair market value (FMV) of employer-provided health coverage for domestic partners is considered taxable income.

Visit healthysteps4u.org for more information.

Employee responsibility for domestic partner premiums is after tax.

If your hourly rate* is \$39.29 or more, there will be a \$50 monthly **Working Spouse/Eligible Domestic Partner Access Fee** unless you certify annually that your spouse/eligible domestic partner is enrolled in their employer-sponsored medical plan or is not eligible for another employer's plan.