

**2019 Health Insurance Plans (Effective January 1, 2019)**

**All Employees**

	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total Semi-Monthly Premium <sup>2</sup>	Total Monthly Premium <sup>2</sup>
	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost		
<b>Kaiser HMO</b>								
Employee Only	51.39	292.22	124.20	219.41	197.00	146.61	343.61	687.22
Employee + 1	102.78	583.44	248.39	437.83	394.00	292.22	686.22	1372.44
Employee + Family	145.44	825.16	351.48	619.12	557.52	413.08	970.60	1941.20

	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total Semi-Monthly Premium <sup>2</sup>	Total Monthly Premium <sup>2</sup>
	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost		
<b>Kaiser HDHP</b>								
Employee Only	40.35	229.62	40.35	229.62	154.66	115.31	269.97	539.94
Employee + 1	80.69	458.25	195.00	343.94	309.32	229.62	538.94	1077.88
Employee + Family	114.18	648.01	275.93	486.26	437.68	324.51	762.19	1524.38

	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost		
<b>Blue Shield HMO</b>								
Employee Only	85.82	486.34	207.41	364.75	328.99	243.17	572.16	1144.32
Employee + 1	171.65	972.67	414.82	729.50	657.98	486.34	1144.32	2288.64
Employee + Family	242.88	1376.34	586.97	1032.25	931.05	688.17	1619.22	3238.44

	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost		
<b>Blue Shield TRIO HMO</b>								
Employee Only	73.44	416.16	177.48	312.12	281.52	208.08	489.60	979.20
Employee + 1	146.88	832.32	354.96	624.24	563.04	416.16	979.20	1958.40
Employee + Family	207.84	1177.73	502.27	883.30	796.70	588.87	1385.57	2771.14

	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost		
<b>Blue Shield PPO</b>								
Employee Only	170.26	510.77	297.95	383.07	425.64	255.38	681.02	1362.04
Employee + 1	353.61	1060.84	618.82	795.63	884.03	530.42	1414.45	2828.90
Employee + Family	514.55	1543.65	900.46	1157.74	1286.37	771.83	2058.20	4116.40

	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost		
<b>Blue Shield HDHP</b>								
Employee Only	66.22	375.23	160.03	281.42	253.83	187.62	441.45	882.90
Employee + 1	132.43	750.47	320.05	562.85	507.67	375.24	882.90	1765.80
Employee + Family	187.40	1061.91	452.87	796.44	718.35	530.96	1249.31	2498.62

	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost		
<b>Operating Engineers PPO, Dental &amp; Vision</b>								
Employee Only	38.50	346.50	125.13	259.88	211.75	173.25	385.00	770.00
Employee + 1	77.00	693.00	250.25	519.75	423.50	346.50	770.00	1540.00
Employee + Family	103.95	935.55	337.84	701.66	571.72	467.78	1039.50	2079.00

	Full Time Employees		3/4 Time Employees		1/2 Time Employees		Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost		
<b>Operating Engineers Kaiser, Dental &amp; Vision</b>								
Employee Only	42.70	384.30	138.77	288.23	234.85	192.15	427.00	854.00
Employee + 1	85.40	768.60	277.55	576.45	469.70	384.30	854.00	1708.00
Employee + Family	111.40	1002.60	362.05	751.95	612.70	501.30	1114.00	2228.00

**2019 Dental & Vision Contributions**

	Cigna Dental PPO			
	Core Dental Plan (No max, no ortho coverage)		Management Buy up- Core plus Buy-Up (4k Ortho Coverage)	
	Employee Cost	County Cost <sup>1</sup>	Employee Cost	County Cost <sup>1</sup>
<b>Management, Confidential, District Attorney/County Counsel, Sheriff Sergeant</b>				
Employee Only			22.54	
Employee + 1	7.07	63.61	39.56	63.61
Employee + 2 ore more			51.93	

	Cigna Dental PPO							
	Core Dental Plan (2.5k Max)		Year 2+ Actives - Core plus Buy-Up 1 (4k Max)		Year 2+ Actives - Core plus Buy-Up 2 (4k Ortho Coverage)		Year 2+ Actives - Core plus Buy-Up 3 (4k Max & 4k Ortho Coverage)	
	Employee Cost	County Cost <sup>1</sup>	Employee Cost	County Cost <sup>1</sup>	Employee Cost	County Cost <sup>1</sup>	Employee Cost	County Cost <sup>1</sup>
<b>All other represented employee groups</b>								
Employee Only			11.89		17.05		23.24	
Employee + 1	5.70	51.34	18.71	51.34	29.55	51.34	42.57	51.34
Employee + 2 ore more			23.68		38.63		56.60	

	Delta Care DHMO		VSP Vision Care	
	Employee cost	County cost	Employee cost	County cost
<b>Management, Confidential, District Attorney/County Counsel, Sheriff Sergeant</b>				
	2.25	20.24	0.00	8.03
<b>All other represented employee groups</b>	2.25	20.24		

	VSP Vision Care Buy-Up	
	Employee cost	County cost
Employee Only	2.28	
Employee + 1	4.78	8.03
Employee + 2 ore more	6.83	

<sup>1</sup>The annual premiums are divided into 24 pay periods

(1) The 3-tier Employee Cost Rates are derived using the current composite funding rates of \$114.08 & \$141.35

(2) Includes Kaiser Admin Fee that County picks up.