

2021 Health Insurance Plans (Effective January 1, 2021)

All Employees

Kaiser HMO	Full Time Employees			3/4 Time Employees			1/2 Time Employees			Total Semi-Monthly Premium ²	Total Monthly Premium ²
	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost		
Employee Only	52.40	296.89	297.89	52.40	222.67	297.89	200.84	148.45	149.45	350.29	700.58
Employee +1	104.79	593.78	594.78	253.23	445.34	446.34	401.68	296.89	297.89	699.57	1399.14
Employee + Family	148.27	840.21	841.21	358.32	630.16	631.16	568.38	420.10	421.10	989.48	1978.96

Kaiser HDHP	Full Time Employees			3/4 Time Employees			1/2 Time Employees			Total Semi-Monthly Premium ²	Total Monthly Premium ²
	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost		
Employee Only	41.14	233.10	234.10	41.14	174.82	234.10	157.69	116.55	117.55	275.24	550.48
Employee +1	82.27	466.20	467.20	198.82	349.65	350.65	315.37	233.10	234.10	549.47	1098.94
Employee + Family	116.42	659.67	660.67	281.34	494.75	495.75	446.25	329.84	330.84	777.09	1554.18

Blue Shield HMO	Full Time Employees			3/4 Time Employees			1/2 Time Employees			Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost		
Employee Only	89.20		505.50	215.57		379.13	341.95		252.75	594.70	1189.40
Employee +1	178.41		1010.99	431.16		758.24	683.90		505.50	1189.40	2378.80
Employee + Family	252.45		1430.56	610.09		1072.92	967.73		715.28	1683.01	3366.02

Blue Shield TRIO HMO	Full Time Employees			3/4 Time Employees			1/2 Time Employees			Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County Cost (without Kaiser Admin Fee)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost		
Employee Only	69.77		395.35	168.61		296.51	267.44		197.68	465.12	930.24
Employee +1	139.54		790.70	337.21		593.03	534.89		395.35	930.24	1860.48
Employee + Family	197.44		1118.85	477.15		839.14	756.86		559.43	1316.29	2632.58

Blue Shield PPO	Full Time Employees			3/4 Time Employees			1/2 Time Employees			Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost		
Employee Only	184.36		553.08	322.63		414.81	460.90		276.54	737.44	1474.88
Employee +1	382.91		1148.73	670.09		861.55	957.27		574.37	1531.64	3063.28
Employee + Family	557.18		1671.53	975.06		1253.65	1392.94		835.77	2228.71	4457.42

Blue Shield HDHP	Full Time Employees			3/4 Time Employees			1/2 Time Employees			Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost		
Employee Only	71.70		406.32	173.28		304.74	274.86		203.16	478.02	956.04
Employee +1	143.41		812.63	346.57		609.47	549.72		406.32	956.04	1912.08
Employee + Family	202.92		1149.89	490.39		862.42	777.86		574.95	1352.81	2705.62

Operating Engineers PPO, Dental & Vision	Full Time Employees			3/4 Time Employees			1/2 Time Employees			Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost		
Employee Only	44.45		400.05	144.46		300.04	244.47		200.03	444.50	889.00
Employee +1	88.85		799.65	288.76		599.74	488.67		399.83	888.50	1777.00
Employee + Family	120.00		1080.00	390.00		810.00	660.00		540.00	1200.00	2400.00

Operating Engineers Kaiser, Dental & Vision	Full Time Employees			3/4 Time Employees			1/2 Time Employees			Total Semi-Monthly Premium	Total Monthly Premium
	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost	Employee cost	County Cost (without Kaiser Admin)	County cost		
Employee Only	45.10		405.90	146.57		304.43	248.05		202.95	451.00	902.00
Employee +1	90.15		811.35	292.99		608.51	495.82		405.68	901.50	1803.00
Employee + Family	117.60		1058.40	382.20		793.80	646.80		529.20	1176.00	2352.00

2021 Dental & Vision Contributions

Management, Confidential, District Attorney/County Counsel, Sheriff Sergeant	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 ¹		Employee Cost	County Cost ¹	
Employee Only				23.17		
Employee + 1	7.27		65.39	40.66		65.39
Employee + 2 ore more				53.38		

All other represented employee groups	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 ¹		Employee Cost	County Cost ¹		Employee Cost	County Cost ¹		Employee Cost	County Cost ¹	
Employee Only				12.22			17.53			23.89		
Employee + 1	5.86		52.77	19.24		52.77	30.38		52.77	43.76		52.77
Employee + 2 ore more				24.35			39.72			58.19		

Management, Confidential, District Attorney/County Counsel, Sheriff Sergeant	Delta Care DHMO			VSP Vision Care		
	Employee cost	County cost		Employee cost	County cost	
	2.25		20.24	0.00		8.26
All other represented employee groups	2.25		20.24			

VSP Vision Care Buy-Up		
Employee cost	County cost	
Employee Only	2.66	
Employee + 1	5.59	8.26
Employee + 2 ore more	7.99	

¹The annual premiums are divided into 24 pay periods

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

²In order to calculate the tiered vision rates, we need tiered enrollment breakdowns from the County.