

# HEALTH PLAN CONTRIBUTION RATES DEPUTY SHERIFF'S ASSOCIATION

Effective January 1, 2014

*Employee contributions are deducted 24 pay periods per year.*

| Full Time Employees   |                 |                 |                 |
|---|-----------------|-----------------|-----------------|
| BLUE SHIELD PPO \$200 DEDUCTIBLE PLAN   |                 |                 |                 |
|   | Employee Only   | Employee + 1    | Family          |
| County Contribution   | \$353.70        | \$637.95        | \$887.69        |
| <b>Employee Contribution</b>  | <b>\$190.46</b> | <b>\$343.51</b> | <b>\$477.98</b> |
| BLUE SHIELD PPO \$1,250 ABHP*   |                 |                 |                 |
|   | Employee Only   | Employee + 1    | Family          |
| County Contribution   | \$278.30        | \$502.42        | \$699.19        |
| <b>Employee Contribution</b>  | <b>\$149.86</b> | <b>\$270.54</b> | <b>\$376.48</b> |
| KAISER HMO  |                 |                 |                 |
|   | Employee Only   | Employee + 1    | Family          |
| County Contribution   | \$233.08        | \$461.68        | \$652.26        |
| <b>Employee Contribution</b>  | <b>\$125.50</b> | <b>\$248.60</b> | <b>\$351.21</b> |
| UNITED HEALTHCARE HMO   |                 |                 |                 |
|   | Employee Only   | Employee + 1    | Family          |
| County Contribution   | \$296.98        | \$603.10        | \$852.85        |
| <b>Employee Contribution</b>  | <b>\$159.91</b> | <b>\$324.75</b> | <b>\$459.22</b> |
| <b>Note: Employees receive \$4,108 over 24 pay periods in Optional Benefits Plan credits, which can be used to offset employee contributions. (24 pay periods at \$171.17 each)</b> |                 |                 |                 |

| Part Time Employees (40-63 hours per pay period)  |                 |                 |                 |
|---|-----------------|-----------------|-----------------|
| BLUE SHIELD PPO \$200 DEDUCTIBLE PLAN   |                 |                 |                 |
|   | Employee Only   | Employee + 1    | Family          |
| County Contribution   | \$265.28        | \$478.46        | \$665.76        |
| <b>Employee Contribution</b>  | <b>\$278.88</b> | <b>\$503.00</b> | <b>\$699.91</b> |
| BLUE SHIELD PPO \$1,250 ABHP*   |                 |                 |                 |
|   | Employee Only   | Employee + 1    | Family          |
| County Contribution   | \$208.73        | \$376.82        | \$524.39        |
| <b>Employee Contribution</b>  | <b>\$219.43</b> | <b>\$396.14</b> | <b>\$551.28</b> |
| KAISER HMO  |                 |                 |                 |
|   | Employee Only   | Employee + 1    | Family          |
| County Contribution   | \$174.81        | \$346.26        | \$489.19        |
| <b>Employee Contribution</b>  | <b>\$183.77</b> | <b>\$364.02</b> | <b>\$514.28</b> |
| UNITED HEALTHCARE HMO   |                 |                 |                 |
|   | Employee Only   | Employee + 1    | Family          |
| County Contribution   | \$222.74        | \$452.33        | \$639.63        |
| <b>Employee Contribution</b>  | <b>\$234.15</b> | <b>\$475.52</b> | <b>\$672.44</b> |
| <b>Note: Employees receive \$3,081 over 24 pay periods in Optional Benefits Plan credits, which can be used to offset employee contributions. (24 pay periods at \$128.38 each)</b> |                 |                 |                 |

| Part Time Employees (32-39 hours per pay period)   |                 |                 |                 |
|--|-----------------|-----------------|-----------------|
| BLUE SHIELD PPO \$200 DEDUCTIBLE PLAN  |                 |                 |                 |
|  | Employee Only   | Employee + 1    | Family          |
| County Contribution  | \$176.85        | \$318.98        | \$443.84        |
| <b>Employee Contribution</b>   | <b>\$367.31</b> | <b>\$662.48</b> | <b>\$921.83</b> |
| BLUE SHIELD PPO \$1,250 ABHP*  |                 |                 |                 |
|  | Employee Only   | Employee + 1    | Family          |
| County Contribution  | \$139.15        | \$251.21        | \$349.59        |
| <b>Employee Contribution</b>   | <b>\$289.01</b> | <b>\$521.75</b> | <b>\$726.08</b> |
| KAISER HMO   |                 |                 |                 |
|  | Employee Only   | Employee + 1    | Family          |
| County Contribution  | \$116.54        | \$230.84        | \$326.13        |
| <b>Employee Contribution</b>   | <b>\$242.04</b> | <b>\$479.44</b> | <b>\$677.34</b> |
| UNITED HEALTHCARE HMO  |                 |                 |                 |
|  | Employee Only   | Employee + 1    | Family          |
| County Contribution  | \$148.49        | \$301.55        | \$426.42        |
| <b>Employee Contribution</b>   | <b>\$308.40</b> | <b>\$626.30</b> | <b>\$885.65</b> |
| <b>Note: Employees receive \$2,054 over 24 pay periods in Optional Benefits Plan credits, which can be used to offset employee contributions. (24 pay periods at \$85.58 each)</b> |                 |                 |                 |

These part-time rates apply to employees who became part-time employees after 09/07/91. Those who became part-time employees prior to 09/07/91 contribute as if they were full time.

\* Account-Based Health Plan

Revised 4/18/14