All Employees

	Full Time	Employees	3/4 Time Employees		1/2 Time Employees		Total	Total
Blue Shield HMO	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	93.22	528.24	225.28	396.18	357.34	264.12	621.46	1242.92
Employee +1	186.44	1056.49	450.56	792.37	714.68	528.25	1242.93	2485.86
Employee + Family	263.81	1494.94	637.54	1121.21	1011.28	747.47	1758.75	3517.50

	Full Time	Employees	3/4 Time Employees		1/2 Time Employees		Total	Total
Blue Shield TRIO HMO	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	72.21	409.19	174.51	306.89	276.80	204.60	481.40	962.80
Employee +1	144.42	818.38	349.01	613.79	553.61	409.19	962.80	1925.60
Employee + Family	204.35	1158.01	493.85	868.51	783.35	579.01	1362.36	2724.72

	Full Time	Employees	3/4 Time Employees		1/2 Time Employees		Total	Total
Blue Shield PPO	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	198.19	594.56	346.83	445.92	495.47	297.28	792.75	1585.50
Employee +1	411.63	1234.89	720.35	926.17	1029.07	617.45	1646.52	3293.04
Employee + Family	598.97	1796.90	1048.19	1347.68	1497.42	898.45	2395.87	4791.74

	Full Time	Employees	3/4 Time Employees		1/2 Time Employees		Total	Total
Blue Shield HDHP	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	77.08	436.79	186.28	327.59	295.47	218.40	513.87	1027.74
Employee +1	154.16	873.59	372.56	655.19	590.95	436.80	1027.75	2055.50
Employee + Family	218.14	1236.13	527.17	927.10	836.20	618.07	1454.27	2908.54

	Full Time	Employees	3/4 Time Employees		1/2 Time Employees		Total	Total
Kaiser HMO	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium ²	Monthly Premium ²
Employee Only	52.81	300.27	52.81	300.27	202.45	150.63	353.08	706.16
Employee +1	105.62	599.54	255.26	449.90	404.89	300.27	705.16	1410.32
Employee + Family	149.46	847.93	361.19	636.20	572.92	424.47	997.39	1994.78

	Full Time	Employees	3/4 Time Employees		1/2 Time Employees		Total	Total
Kaiser HDHP	Employee Cost	County Cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium ²	Monthly Premium ²
Employee Only	41.46	235.97	41.46	235.97	158.95	118.48	277.43	554.86
Employee +1	82.93	470.93	200.41	353.45	317.89	235.97	553.86	1107.72
Employee + Family	117.34	665.95	283.58	499.71	449.82	333.47	783.29	1566.58

Operating Engineers	Full Time	Full Time Employees 3/4 Time Employees		1/2 Time Employees		Total	Total	
PPO, Dental & Vision	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	44.65	401.85	145.11	301.39	245.57	200.93	446.50	893.00
Employee +1	89.30	803.70	290.22	602.78	491.15	401.85	893.00	1786.00
Employee + Family	120.55	1084 95	391 79	813 71	663.02	542 48	1205 50	2411.00

Operating Engineers	Full Time	Employees	3/4 Time Employees		1/2 Time Employees		Total	Total
Kaiser, Dental & Vision	Employee cost	County cost	Employee cost	County cost	Employee cost	County cost	Semi-Monthly Premium	Monthly Premium
Employee Only	47.35	426.15	153.89	319.61	260.42	213.08	473.50	947.00
Employee +1	94.70	852.30	307.77	639.23	520.85	426.15	947.00	1894.00
Employee + Family	123.50	1111.50	401.37	833.63	679.25	555.75	1235.00	2470.00

2021 Dental & Vision Contributions

		Cigna Dental PPO						
Management, Confidential, District Attorney/County Counsel, Sheriff Sergeant		lan (No max, no overage)	Management B plus Buy-Up Covera	(4k Ortho				
	Employee Cost	County Cost ¹	Employee Cost	County Cost1				
Employee Only			22.71					
Employee + 1	7.12	64.08	39.85	64.08				
Employee + 2 ore more			52.32					

		Ciana Dental PPO									
All other represented		Voor 21 Actives - Core plus Voor 21 Actives - Core plus Voor 21 Actives - Core plus Punt									
employee groups	Core Dental Plan (2.5k Max)				Buy-Up 2 (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			11.98		17.18		23.42	•			
Employee + 1	5.75	51.71	18.86	51.71	29.77	51.71	42.88	51.71			
Employee + 2 ore more			23.87		38.93		57.03				

	Cigna	DHMO	VSP Vision Care		
	Employee cost	County cost	Employee cost	County cost	
Management, Confidential, District Attorney/County Counsel, Sheriff Sergeant	2.15	19.34	0.00	8.26	
All other represented employee groups	2.15	19.34			

	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	

^{*}The annual premiums are divided into 24 pay periods

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