

San Benito County
2017 Contribution Rate Sheet
Effective: January 1, 2017

Plan by Tier	Active Rates			BiWeekly (24 Pay Period) Cost
Active and Early Retiree Rates	Carrier Rates	County Contribution	Employee Share	Employee Share
EIA Kaiser HMO				
Single	\$749.00	\$550.00	\$199.00	\$99.50
Two Party	\$1,483.00	\$1,050.00	\$433.00	\$216.50
Family	\$1,924.00	\$1,315.00	\$609.00	\$304.50
EIA Anthem SAFETY PPO				
Single	\$645.00	\$550.00	\$95.00	\$47.50
Two Party	\$1,291.00	\$1,050.00	\$241.00	\$120.50
Family	\$1,650.00	\$1,315.00	\$335.00	\$167.50
EIA Anthem PPO MID				
Single	\$734.00	\$550.00	\$184.00	\$92.00
Two Party	\$1,468.00	\$1,050.00	\$418.00	\$209.00
Family	\$1,908.00	\$1,315.00	\$593.00	\$296.50
EIA Anthem HDHP				
Single	\$668.00	\$550.00	\$118.00	\$59.00
Two Party	\$1,335.00	\$1,050.00	\$285.00	\$142.50
Family	\$1,736.00	\$1,315.00	\$421.00	\$210.50
	Split Rates (NonMedicare + Medicare Retirees)			
Non-Medicare Employee, Medicare Dependent(s)	Carrier Rates	County Contribution	Employee Share	Employee Share
Kaiser HMO				
Retiree (1 Medicare, 1 Without)	\$1,050.00	\$1,050.00	\$0.00	\$0.00
Retiree (1 Medicare, 2 Without)	\$1,491.00	\$1,315.00	\$176.00	\$88.00
Retiree (2 Medicare, 1 Without)	\$1,058.00	\$1,058.00	\$0.00	\$0.00
EIA Anthem PPO Mid				
Retiree (1 Medicare, 1 Without)	\$1,119.00	\$1,050.00	\$69.00	\$34.50
Retiree (1 Medicare, 2 Without)	\$1,559.00	\$1,315.00	\$244.00	\$122.00
Retiree (2 Medicare, 1 Without)	\$1,209.00	\$1,209.00	\$0.00	\$0.00
Medicare Employee, Non-Medicare Dependent(s)				
Kaiser HMO				
Retiree (1 Medicare, 1 Without)	\$1,050.00	\$735.00	\$315.00	\$157.50
Retiree (1 Medicare, 2 Without)	\$1,491.00	\$920.50	\$570.50	\$285.25
Retiree (2 Medicare, 1 Without)	\$1,058.00	\$920.50	\$137.50	\$68.75
EIA Anthem PPO Mid				
Retiree (1 Medicare, 1 Without)	\$1,119.00	\$735.00	\$384.00	\$192.00
Retiree (1 Medicare, 2 Without)	\$1,559.00	\$920.50	\$638.50	\$319.25
Retiree (2 Medicare, 1 Without)	\$1,209.00	\$920.50	\$288.50	\$144.25
	Retiree Rates (County Contribution 70% of Active)			
Medicare Rates	Carrier Rates	County Contribution	Employee Share	Employee Share
KPSA (EIA Health)				
Single	\$316.00	\$316.00	\$0.00	\$0.00
Two Party	\$617.00	\$617.00	\$0.00	\$0.00
Family	\$917.00	\$917.00	\$0.00	\$0.00
EIA Anthem PPO MID SUPP EGWP				
Single	\$385.00	\$385.00	\$0.00	\$0.00
Two Party	\$769.00	\$735.00	\$34.00	\$17.00
Family	\$1,154.00	\$920.50	\$233.50	\$116.75