2020

COUNTY OF SHASTA

PREMIUM RATES FOR MEDICAL/DENTAL/VISION

TEAMSTERS - TRADES AND CRAFTS UNIT (07)

PLAN E HIGH DEDUCTIBLE W/HSA	2020 MONTHLY PREMIUM		MONTHLY COUNTY PAYMENT	MONTHLY PAID BY TEAMSTER TRUST	PAY PERIOD EMPLOYEE SHARE
Med/RX/Den/VSP/Life/HSA					
EE Only	684.00	*	767.63	0.00	0.00
EE + Spouse	1,154.00	**	1,174.09	0.00	0.00
EE + Child(ren)	1,106.00	**	1,174.09	0.00	0.00
EE + Family	1,525.00	**	1,526.00	0.00	0.00
Med/RX/Life/HSA					
EE Only	629.00	*	767.63	0.00	0.00
EE + Spouse	1,046.00	**	1,174.09	0.00	0.00
EE + Child(ren)	965.00	**	1,174.09	0.00	0.00
EE + Family	1,329.00	**	1,526.00	0.00	0.00

* 58.00 of premium amount is deposited to employee's HSA account

** 117.00 of premium amount is deposited to employee's HSA account

SELECT PLUS $0 DEDUCTIBLE NO HSA	2020 MONTHLY PREMIUM		MONTHLY COUNTY PAYMENT	MONTHLY PAID BY TEAMSTER TRUST	PAY PERIOD EMPLOYEE SHARE
Med/RX/Den/VSP					
EE Only	749.00		767.63	0.00	0.00
EE + Spouse	1,270.00		1,174.09	95.91	0.00
EE + Child(ren)	1,207.00		1,174.09	32.91	0.00
EE + Family	1,682.00		1,526.00	156.00	0.00
Medical/RX					
EE Only	694.00		767.63	0.00	0.00
EE + Spouse	1,159.00		1,174.09	0.00	0.00
EE + Child(ren)	1,065.00		1,174.09	0.00	0.00
EE + Family	1,486.00		1,526.00	0.00	0.00
Dental/VSP/Life					
EE Only	99.00		35.63	63.37	0.00
EE + Spouse	167.00		54.56	112.44	0.00
EE + Child(ren)	159.00		54.56	104.44	0.00
EE + Family	222.00		70.60	151.40	0.00

For questions regarding Teamsters Health options, please contact the Teamsters' office.
Heather McFall @ 530-243-0232