

2021

**COUNTY OF SHASTA**  
**MEDICAL PREMIUMS, COUNTY CONTRIBUTIONS AND RETIREE COST<sup>1</sup>**  
**For retirees covered under the**  
**DEPUTY SHERIFF'S ASSOCIATION - CORRECTIONAL OFFICERS (09)**

To determine your cost of insurance, first find the chart that pertains to your situation and any of the individual(s) covered by your insurance. Then find the CalPERS Plan in which you are enrolled.

**Neither the retiree nor any covered individuals are in Medicare**

CalPERS Basic Monthly Rates

Plan	Retiree Only	Retiree & 1 Dependent	Retiree & 2+ Dependents
<b>PERS Choice Premium</b>	935.84	1,871.68	2,433.18
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	792.84	1,728.68	2,290.18
Retiree reimbursement from Shasta County	618.01	950.22	1,158.19
<b>Retiree Net Cost of Medical Premiums</b>	<b>174.83</b>	<b>778.46</b>	<b>1,131.99</b>
<b>PERS Select Premium</b>	566.67	1,133.34	1,473.34
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	423.67	990.34	1,330.34
Retiree reimbursement from Shasta County	423.67	950.22	1,158.19
<b>Retiree Net Cost of Medical Premiums</b>	<b>-</b>	<b>40.12</b>	<b>172.15</b>
<b>PERS Care Premium</b>	1,294.69	2,589.38	3,366.19
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,151.69	2,446.38	3,223.19
Retiree reimbursement from Shasta County	618.01	950.22	1,158.19
<b>Retiree Net Cost of Medical Premiums</b>	<b>533.68</b>	<b>1,496.16</b>	<b>2,065.00</b>
<b>PORAC Premium</b>	799.00	1,725.00	2,199.00
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	656.00	1,582.00	2,056.00
Retiree reimbursement from Shasta County	618.01	950.22	1,158.19
<b>Retiree Net Cost of Medical Premiums</b>	<b>37.99</b>	<b>631.78</b>	<b>897.81</b>

<sup>1</sup>Retirees hired after 01/01/2018 or those hired prior to that date that have opted in to the Shasta County's 401a Plan are eligible only for the County required minimum paid directly to CalPERS\*. No reimbursement is applicable, therefore the net cost for such a retiree will be the amount of the CalPERS deduction from Retiree pension allowance\*\*.

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The retiree and all covered individuals are in Medicare			
CalPERS Supplement/Managed Medicare Monthly Rates			
Plan	Retiree Only	Retiree & 1 Dependent	Retiree & 2+ Dependents
<b>PERS Choice Premium</b>	349.97	699.94	1,049.91
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	206.97	556.94	906.91
Retiree reimbursement from Shasta County	206.97	556.94	906.91
<b>Retiree Net Cost of Medical Premiums</b>	-	-	-
<b>PERS Select Premium</b>	349.97	699.94	1,049.91
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	206.97	556.94	906.91
Retiree reimbursement from Shasta County	206.97	556.94	906.91
<b>Retiree Net Cost of Medical Premiums</b>	-	-	-
<b>PERS Care Premium</b>	381.25	762.50	1,143.75
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	238.25	619.50	1,000.75
Retiree reimbursement from Shasta County	238.25	619.50	1,000.75
<b>Retiree Net Cost of Medical Premiums</b>	-	-	-
<b>PORAC Premium</b>	513.00	1,022.00	1,635.00
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	370.00	879.00	1,492.00
Retiree reimbursement from Shasta County	370.00	879.00	1,158.19
<b>Retiree Net Cost of Medical Premiums</b>	-	-	<b>333.81</b>

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To determine your cost of insurance, first find the chart that pertains to your situation and any of the individual(s) covered by your insurance. Then find the CalPERS Plan in which you are enrolled.

<b>Retiree is in Medicare with at least one covered dependent who is not in Medicare</b>			
CalPERS Combination (Basic and Supplement/Managed Medicare) Monthly Rates			
<b>Plan</b>	<b>1 dependent who is not in Medicare</b>	<b>2+ dependents who are not in Medicare</b>	<b>2+ dependents with at least 1 not in Medicare</b>
<b>PERS Choice Premium</b>	1,285.81	1,847.31	1,261.44
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,142.81	1,704.31	1,118.44
Retiree reimbursement from Shasta County	950.22	1,158.19	1,118.44
<b>Retiree Net Cost of Medical Premiums</b>	<b>192.59</b>	<b>546.12</b>	-
<b>PERS Select Premium</b>	916.64	1,256.64	1,039.94
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	773.64	1,113.64	896.94
Retiree reimbursement from Shasta County	773.64	1,113.64	896.94
<b>Retiree Net Cost of Medical Premiums</b>	-	-	-
<b>PERS Care Premium</b>	1,675.94	2,452.75	1,539.31
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,532.94	2,309.75	1,396.31
Retiree reimbursement from Shasta County	950.22	1,158.19	1,158.19
<b>Retiree Net Cost of Medical Premiums</b>	<b>582.72</b>	<b>1,151.56</b>	<b>238.12</b>
<b>PORAC Premium</b>	1,439.00	1,913.00	1,496.00
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,296.00	1,770.00	1,353.00
Retiree reimbursement from Shasta County	618.01	1,158.19	1,158.19
<b>Retiree Net Cost of Medical Premiums</b>	<b>677.99</b>	<b>611.81</b>	<b>194.81</b>

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<b>Retiree is <u>not</u> in Medicare with at least one covered dependent who is in Medicare</b>			
CalPERS Combination (Basic and Supplement/Managed Medicare) Monthly Rates			
<b>Plan</b>	<b>1 dependent who is in Medicare</b>	<b>2+ dependents who are all in Medicare</b>	<b>2+ dependents with at least 1 in Medicare</b>
<b>PERS Choice Premium</b>	1,285.81	1,635.78	1,847.31
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,142.81	1,492.78	1,704.31
Retiree reimbursement from Shasta County	950.22	1,158.19	1,158.19
<b>Retiree Net Cost of Medical Premiums</b>	<b>192.59</b>	<b>334.59</b>	<b>546.12</b>
<b>PERS Select Premium</b>	916.64	1,266.61	1,256.64
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	773.64	1,123.61	1,113.64
Retiree reimbursement from Shasta County	773.64	1,123.61	1,113.64
<b>Retiree Net Cost of Medical Premiums</b>	-	-	-
<b>PERS Care Premium</b>	1,675.94	2,057.19	2,452.75
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,532.94	1,914.19	2,309.75
Retiree reimbursement from Shasta County	950.22	1,158.19	1,158.19
<b>Retiree Net Cost of Medical Premiums</b>	<b>582.72</b>	<b>756.00</b>	<b>1,151.56</b>
<b>PORAC Premium</b>	1,308.00	1,825.00	1,782.00
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,165.00	1,682.00	1,639.00
Retiree reimbursement from Shasta County	950.22	1,158.19	1,158.19
<b>Retiree Net Cost of Medical Premiums</b>	<b>214.78</b>	<b>523.81</b>	<b>480.81</b>

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