

**HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND  
ACTIVE EMPLOYEES**

**EFFECTIVE JANUARY 1, 2012:**

**FOR BOARD OF WATER SUPPLY, CITY & COUNTY OF HONOLULU, COUNTY OF KAUAI, HI PUBLIC CHARTER SCHOOLS,  
& STATE - BU'S 01, 02, 03, 04, 06, 07, 08, 13**

**HSTA VEBA EMPLOYEES WHO OPTED TO TRANSFER TO EUTF PLANS - BU'S 05, 45**

**BU'S 05, 45 EMPLOYEES HIRED ON OR AFTER JANUARY 1, 2011**

Benefit Plan	Type of Enrollment	Semi-Monthly Employee Contribution	Monthly Employee Contribution	Monthly Employer Contribution	Total
<b>MEDICAL PLANS</b>					
HMSA 90/10 PPO RSN Chiropractic	Self	\$86.26	\$172.52	\$172.52	\$345.04
	Two-Party	\$209.06	\$418.12	\$418.12	\$836.24
	Family	\$266.67	\$533.34	\$533.34	\$1,066.68
HMSA 80/20 PPO RSN Chiropractic	Self	\$82.35	\$164.70	\$164.70	\$329.40
	Two-Party	\$199.57	\$399.14	\$399.14	\$798.28
	Family	\$254.57	\$509.14	\$509.14	\$1,018.28
Prescription Drug - PPO Plans	Self	\$15.35	\$30.70	\$30.70	\$61.40
	Two-Party	\$37.26	\$74.52	\$74.52	\$149.04
	Family	\$47.54	\$95.08	\$95.08	\$190.16
HMSA HMO Prescription Drug RSN Chiropractic	Self	\$113.19	\$226.38	\$226.38	\$452.76
	Two-Party	\$274.45	\$548.90	\$548.90	\$1,097.80
	Family	\$350.07	\$700.14	\$700.14	\$1,400.28
HMSA High Deductible Health Plan Prescription Drug	Self	\$85.60	\$171.20	\$171.20	\$342.40
	Two-Party	\$207.55	\$415.10	\$415.10	\$830.20
	Family	\$264.95	\$529.90	\$529.90	\$1,059.80
Kaiser Basic Prescription Drug RSN Chiropractic	Self	\$94.86	\$189.72	\$189.72	\$379.44
	Two-Party	\$230.13	\$460.26	\$460.26	\$920.52
	Family	\$293.70	\$587.40	\$587.40	\$1,174.80
Kaiser Comprehensive Prescription Drug RSN Chiropractic	Self	\$108.70	\$217.40	\$217.40	\$434.80
	Two-Party	\$263.77	\$527.54	\$527.54	\$1,055.08
	Family	\$336.62	\$673.24	\$673.24	\$1,346.48
HMSA Supplemental Prescription Drug RSN Chiropractic	Self	\$52.26	\$104.52	\$104.52	\$209.04
	Two-Party	\$126.53	\$253.06	\$253.06	\$506.12
	Family	\$161.45	\$322.90	\$322.90	\$645.80
Royal State National Supplemental Prescription Drug RSN Chiropractic	Self	\$10.86	\$21.72	\$21.72	\$43.44
	Two-Party	\$26.70	\$53.40	\$53.40	\$106.80
	Family	\$30.18	\$60.36	\$60.36	\$120.72
<b>DENTAL PLAN</b>					
HDS Dental	Self	\$7.29	\$14.58	\$14.58	\$29.16
	Two-Party	\$14.58	\$29.16	\$29.16	\$58.32
	Family	\$23.96	\$47.92	\$47.92	\$95.84
<b>VISION PLAN</b>					
VSP Vision	Self	\$1.51	\$3.02	\$3.02	\$6.04
	Two-Party	\$2.79	\$5.58	\$5.58	\$11.16
	Family	\$3.65	\$7.30	\$7.30	\$14.60
<b>LIFE INSURANCE</b>					
Royal State National Life Insurance	Employee	\$0.00	\$0.00	\$4.16	\$4.16

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**EFFECTIVE JANUARY 1, 2012:**

**FOR BOARD OF WATER SUPPLY, CITY & COUNTY OF HONOLULU, COUNTY OF KAUAI, HI PUBLIC CHARTER SCHOOLS,  
& STATE - BU'S 09, 10, 11**

<b>Benefit Plan</b>	<b>Type of Enrollment</b>	<b>Semi-Monthly Employee Contribution</b>	<b>Monthly Employee Contribution</b>	<b>*Monthly Employer Contribution</b>	<b>Total</b>
<b>MEDICAL PLANS</b>					
HMSA 90/10 PPO RSN Chiropractic	Self	\$77.85	\$155.70	\$189.34	\$345.04
	Two-Party	\$188.46	\$376.92	\$459.32	\$836.24
	Family	\$240.29	\$480.58	\$586.10	\$1,066.68
HMSA 80/20 PPO RSN Chiropractic	Self	\$70.03	\$140.06	\$189.34	\$329.40
	Two-Party	\$169.48	\$338.96	\$459.32	\$798.28
	Family	\$216.09	\$432.18	\$586.10	\$1,018.28
Prescription Drug - PPO Plans	Self	\$9.33	\$18.66	\$42.74	\$61.40
	Two-Party	\$22.68	\$45.36	\$103.68	\$149.04
	Family	\$28.84	\$57.68	\$132.48	\$190.16
HMSA HMO Prescription Drug RSN Chiropractic	Self	\$110.34	\$220.68	\$232.08	\$452.76
	Two-Party	\$267.40	\$534.80	\$563.00	\$1,097.80
	Family	\$340.85	\$681.70	\$718.58	\$1,400.28
HMSA High Deductible Health Plan Prescription Drug	Self	\$55.16	\$110.32	\$232.08	\$342.40
	Two-Party	\$133.60	\$267.20	\$563.00	\$830.20
	Family	\$170.61	\$341.22	\$718.58	\$1,059.80
Kaiser Basic Prescription Drug RSN Chiropractic	Self	\$73.68	\$147.36	\$232.08	\$379.44
	Two-Party	\$178.76	\$357.52	\$563.00	\$920.52
	Family	\$228.11	\$456.22	\$718.58	\$1,174.80
Kaiser Comprehensive Prescription Drug RSN Chiropractic	Self	\$101.36	\$202.72	\$232.08	\$434.80
	Two-Party	\$246.04	\$492.08	\$563.00	\$1,055.08
	Family	\$313.95	\$627.90	\$718.58	\$1,346.48
HMSA Supplemental Prescription Drug RSN Chiropractic	Self	\$36.51	\$73.02	\$136.02	\$209.04
	Two-Party	\$88.09	\$176.18	\$329.94	\$506.12
	Family	\$112.28	\$224.56	\$421.24	\$645.80
Royal State National Supplemental Prescription Drug RSN Chiropractic	Self	\$8.12	\$16.24	\$27.20	\$43.44
	Two-Party	\$20.15	\$40.30	\$66.50	\$106.80
	Family	\$22.40	\$44.80	\$75.92	\$120.72
<b>DENTAL PLAN</b>					
HDS Dental	Self	\$4.83	\$9.66	\$19.50	\$29.16
	Two-Party	\$9.64	\$19.28	\$39.04	\$58.32
	Family	\$7.54	\$15.08	\$80.76	\$95.84
<b>VISION PLAN</b>					
VSP Vision	Self	\$1.20	\$2.40	\$3.64	\$6.04
	Two-Party	\$2.20	\$4.40	\$6.76	\$11.16
	Family	\$2.88	\$5.76	\$8.84	\$14.60
<b>LIFE INSURANCE</b>					
Royal State National Life Insurance	Employee	\$0.00	\$0.00	\$4.16	\$4.16

\*Effective July 1, 2011 Until Agreement is Reached