

**2013 CONTRA COSTA MONTHLY MEDICAL AND DENTAL PREMIUMS  
 RETIREES REPRESENTED BY PHYSICIAN'S AND DENTIST'S ORGANIZATION AT THE TIME OF RETIREMENT**

<b>FORMER BARGAINING UNITS: 1P &amp; 1R</b>			
<b>County Contribution is a Percentage of Total Premium. County Board Resolution 2006/629. MOU 2005-2008</b>			
<b>PLAN COVERAGE DESCRIPTION</b>	<b>TOTAL MONTHLY PREMIUM</b>	<b>COUNTY MONTHLY SHARE</b>	<b>RETIREE MONTHLY SHARE</b>
<b>CONTRA COSTA HEALTH PLAN - BASIC PLAN A</b>			
Retiree on Basic Plan	\$603.71	\$591.64	\$12.07
Retiree & 1 or more dependents on Basic Plan	\$1,438.38	\$1,409.61	\$28.77
<b>CONTRA COSTA HEALTH PLAN - BASIC PLAN B</b>			
Retiree on Basic Plan	\$669.23	\$602.31	\$66.92
Retiree & 1 or more dependents on Basic Plan	\$1,590.21	\$1,431.19	\$159.02
<b>CONTRA COSTA HEALTH PLAN - MEDICARE COORDINATION OF BENEFITS (COB) PLAN</b>			
Retiree on Medicare COB Plan	\$275.10	\$275.09	\$0.01
Retiree & 1 dependent on Medicare COB Plan	\$1,210.61	\$1,210.60	\$0.01
<b>CONTRA COSTA HEALTH PLAN - MEDICARE COORDINATION OF BENEFITS (COB) PLAN</b>			
Retiree on Medicare COB Plan	\$283.35	\$283.34	\$0.01
Retiree & 1 dependent on Medicare COB Plan	\$1,246.93	\$1,246.92	\$0.01
<b>COMBINATION OF CONTRA COSTA HEALTH PLAN - BASIC PLAN &amp; MEDICARE COB</b>			
Retiree on Medicare COB Plan , and, 1 or more dependents on Basic Plan	\$1,216.11	\$1,216.10	\$0.01
Retiree & 1 dependent on Medicare COB Plan , and, 1 or more dependents on Basic	\$1,210.61	\$1,210.60	\$0.01
Retiree on Basic Plan, and, 1 dependent on Medicare COB Plan	\$1,216.11	\$1,216.10	\$0.01
Retiree on Basic Plan, and, 2 or more dependents on Medicare COB Plan	\$1,210.61	\$1,210.60	\$0.01
Retiree & 1 dependent on Basic Plan, and, 1 or more dependents on Medicare COB	\$1,216.11	\$1,216.10	\$0.01
<b>COMBINATION OF CONTRA COSTA HEALTH PLAN - BASIC PLAN &amp; MEDICARE COB</b>			
Retiree on Medicare COB Plan , and, 1 or more dependents on Basic Plan	\$1,252.59	\$1,232.23	\$20.36
Retiree & 1 dependent on Medicare COB Plan , and, 1 or more dependents on Basic	\$1,246.93	\$1,246.92	\$0.01
Retiree on Basic Plan, and, 1 dependent on Medicare COB Plan	\$1,252.59	\$1,227.23	\$25.36
Retiree on Basic Plan, and, 2 or more dependents on Medicare COB Plan	\$1,246.93	\$1,222.14	\$24.79
Retiree & 1 dependent on Basic Plan, and, 1 or more dependents on Medicare COB	\$1,252.59	\$1,252.58	\$0.01
<b>KAISER PERMANENTE - BASIC PLAN A</b>			
Retiree on Basic Plan	\$739.33	\$591.46	\$147.87
Retiree & 1 or more dependents on Basic Plan	\$1,722.63	\$1,378.10	\$344.53
<b>KAISER PERMANENTE SENIOR ADVANTAGE (KPSA) PLAN A</b>			
Retiree on KPSA Plan	\$268.94	\$268.93	\$0.01
Retiree & 1 dependent on KPSA Plan	\$726.30	\$726.29	\$0.01
Retiree & 2 dependents on KPSA Plan	\$1,183.66	\$1,183.65	\$0.01
<b>COMBINATION OF KAISER BASIC PLAN AND KPSA PLAN A</b>			
Retiree on KPSA Plan, and, 1 or more dependents on Basic Plan	\$1,252.24	\$1,101.69	\$150.55
Retiree & 1 or more dependents on Basic Plan, and, 1 dependent on KPSA Plan	\$1,252.24	\$1,106.69	\$145.55

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<b>County Contribution is a Percentage of Total Premium. County Board Resolution 2006/629. MOU 2005-2008</b>			
<b>PLAN COVERAGE DESCRIPTION</b>	<b>TOTAL MONTHLY PREMIUM</b>	<b>COUNTY MONTHLY SHARE</b>	<b>RETIREE MONTHLY SHARE</b>
<b>HEALTH NET HMO PLAN - BASIC PLAN A</b>			
Retiree on Basic Plan	\$953.04	\$762.43	\$190.61
Retiree & 1 or more dependents on Basic Plan	\$2,337.88	\$1,870.30	\$467.58
<b>HEALTH NET SENIORITY PLUS (HNSP) PLAN A</b>			
Retiree on HNSP Plan	\$498.17	\$498.16	\$0.01
Retiree & 1 dependent on HNSP Plan	\$996.34	\$996.33	\$0.01
Retiree & 2 dependent on HNSP Plan	\$1,494.51	\$1,494.50	\$0.01
<b>COMBINATION OF HEALTH NET SENIORITY PLUS A (HNSP) AND COORDINATION OF BENEFITS (COB) PLANS</b>			
Retiree on HNSP, and, dependent on Health Net Coordination of Benefits (COB) Plan	\$1,032.31	\$1,030.65	\$1.66
Retiree on Health Net Coordination of Benefits (COB) Plan, and, dependent on HNSP	\$1,032.31	\$1,030.65	\$1.66
<b>COMBINATION OF HEALTH NET BASIC PLAN A AND HEALTH NET SENIORITY PLUS PLAN A (HNSP)</b>			
Retiree on HNSP Plan, and, 1 dependent on Basic Plan	\$1,451.21	\$1,265.87	\$185.34
Retiree on HNSP Plan, and, 2 or more dependents on Basic Plan	\$2,836.05	\$2,368.74	\$467.31
Retiree & 1 dependent on HNSP Plan, and, 1 dependent on Basic Plan	\$1,949.38	\$1,759.30	\$190.08
Retiree on Basic Plan, and, 1 dependent on HNSP Plan	\$1,451.21	\$1,265.87	\$185.34
Retiree & 1 or more dependents on Basic Plan, and, 1 dependent on HNSP Plan	\$2,836.05	\$2,368.74	\$467.31
<b>HEALTH NET MEDICARE COORDINATION OF BENEFITS PLAN (HNCOB)</b>			
Retiree on HNCOB Plan	\$534.14	\$532.21	\$1.93
Retiree & 1 or more dependents, 2 on HNCOB	\$1,068.28	\$1,064.42	\$3.86
<b>COMBINATION OF HEALTH NET BASIC PLAN A AND HEALTH NET COORDINATION OF BENEFITS PLAN (HNCOB)</b>			
Retiree on HNCOB, and, 1 dependents on Basic Plan	\$1,487.18	\$1,294.64	\$192.54
Retiree on Basic Plan, and, 1 dependent on HNCOB	\$1,487.18	\$1,289.64	\$197.54
Retiree on HNCOB, and, 2 or more dependents on HN Basic Plan	\$2,872.02	\$2,397.52	\$474.50
Retiree & 1 dependent on HNCOB, and, 1 or more dependents on Basic Plan	\$2,021.32	\$1,826.86	\$194.46
Retiree on Basic Plan, and 2 dependents on HNCOB	\$2,021.32	\$1,816.86	\$204.46
<b>HEALTH NET CA &amp; NAT'L PPO PLAN - BASIC PLAN A</b>			
Retiree on PPO Basic Plan	\$1,219.35	\$680.77	\$538.58
Retiree & 1 or more dependents on PPO Basic Plan	\$2,896.67	\$1,617.19	\$1,279.48
<b>HEALTH NET CA &amp; NAT'L PPO PLAN A WITH MEDICARE PARTS A &amp; B</b>			
Retiree on PPO Medicare Plan	\$872.81	\$592.18	\$285.62
Retiree & 1 or more dependents on PPO Medicare Plan	\$1,745.63	\$1,184.37	\$561.26
<b>COMBINATION OF HEALTH NET CA &amp; NAT'L PPO PLAN A - BASIC PLAN &amp; PPO MEDICARE PLAN A</b>			
Retiree on PPO Medicare Plan, and, 1 dependent on PPO Basic Plan	\$2,092.16	\$1,272.96	\$819.21
Retiree on PPO Basic Plan, and, 1 dependent on PPO Medicare Plan	\$2,092.16	\$1,272.96	\$819.21
Retiree & 1 dependent on PPO Medicare Plan, and, 1 dependent on PPO Basic Plan	\$2,964.98	\$1,856.10	\$1,108.88
Retiree on PPO Basic Plan, and, 2 dependents on PPO Medicare Plan	\$2,964.98	\$1,856.10	\$1,108.88
<b>COMBINATION OF HEALTH NET SENIORITY PLUS PLAN A, AND, HEALTH NET CA &amp; NAT'L PPO PLAN A</b>			
Closed Plan - No New Enrollments			
Retiree on HNSP Plan, and, 1 dependent on PPO Basic Plan	\$1,717.52	\$1,079.31	\$638.21
Retiree on PPO Basic Plan, and, 1 dependent on HNSP Plan	\$1,717.52	\$1,079.31	\$638.21
Retiree on HNSP Plan, and, 1 dependent on PPO Medicare Plan	\$1,370.98	\$986.26	\$384.72
Retiree on PPO Medicare Plan, and, 1 dependent on HNSP Plan	\$1,370.98	\$986.26	\$384.72
Retiree & 1 dependent on HNSP Plan, and, 1 dependent on PPO Basic Plan	\$2,215.69	\$1,477.84	\$737.85
Retiree on PPO Basic Plan, and, 2 dependents on HNSP Plan	\$2,215.69	\$1,477.84	\$737.85

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**FORMER BARGAINING UNITS: 1P & 1R**

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PLAN COVERAGE DESCRIPTION		TOTAL MONTHLY PREMIUM	COUNTY MONTHLY SHARE	RETIREE MONTHLY SHARE
<b>DELTA DENTAL - \$1,600 ANNUAL BENEFIT</b>				
For CCHP Plans A & B	Retiree	\$42.45	\$41.60	\$0.85
	Family	\$95.63	\$93.72	\$1.91
For Health Net Plans A&B	Retiree	\$42.45	\$33.11	\$9.34
	Family	\$95.63	\$74.59	\$21.04
For Kaiser Permanente Plans A & B	Retiree	\$42.45	\$33.11	\$9.34
	Family	\$95.63	\$74.59	\$21.04
Without a Health Plan	Retiree	\$42.45	\$42.44	\$0.01
	Family	\$95.63	\$95.62	\$0.01
<b>DELTA CARE (PMI)</b>				
For CCHP Plans A & B	Retiree	\$28.77	\$28.19	\$0.58
	Family	\$62.18	\$60.94	\$1.24
For Health Net Plans A&B	Retiree	\$28.77	\$22.44	\$6.33
	Family	\$62.18	\$48.50	\$13.68
For Kaiser Permanente Plans A & B	Retiree	\$28.77	\$22.44	\$6.33
	Family	\$62.18	\$48.50	\$13.68
Without a Health Plan	Retiree	\$28.77	\$28.76	\$0.01
	Family	\$62.18	\$62.17	\$0.01