HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND
ACTIVE EMPLOYEES
BU'S 01, 05

EFFECTIVE JULY 1, 2014:

BU 01: FOR CITY AND COUNTY OF HONOLULU, HONOLULU BOARD OF WATER SUPPLY, COUNTY OF KAUAI, COUNTY OF HAWAII, HAWAII DEPARTMENT OF WATER SUPPLY, HAWAII PUBLIC CHARTER SCHOOLS, STATE OF HAWAII

BU 05: FOR HAWAII PUBLIC CHARTER SCHOOLS, STATE OF HAWAII
HSTA VEBA EMPLOYEES WHO OPTED TO TRANSFER TO EUTF PLANS or BU 05 EMPLOYEES HIRED ON OR AFTER JANUARY 1, 2011

							STATE OF HAWAII Semi-Monthly Premium Deduction Amounts on Employee Pay Checks			
Benefit Plan	**Type of Enrollment**	**Semi-Monthly Employee Contribution**	**Monthly Employee Contribution**	**Monthly Employer Contribution**	**Percent Employer**	**Total**	**Medical Deductions/ Reductions Type Code = MR or MD**	**Prescription Drug Deductions/ Reductions Type Code = PR or PD**	**Vision Deductions/ Reductions Type Code = VR or VC**	**Dental Deductions/ Reductions Type Code = DR or DD**
MEDICAL PLANS										
PPO - 90/10 Plan - HMSA Medical	Self	$119.20	$238.40	$266.52	52.8%	$504.92	$101.52	$17.68		
Prescription Drug - CVS Caremark	Two-Party	$289.27	$578.54	$646.72	52.8%	$1,225.26	$246.31	$42.96		
RSN Chiropractic	Family	$368.72	$737.44	$824.24	52.8%	$1,561.68	$313.98	$54.74		
PPO - 80/20 Plan - HMSA Medical	Self	$100.57	$201.14	$266.52	57.0%	$467.66	$82.89	$17.68		
Prescription Drug - CVS Caremark	Two-Party	$244.04	$488.08	$646.72	57.0%	$1,134.80	$201.08	$42.96		
RSN Chiropractic	Family	$311.06	$622.12	$824.24	57.0%	$1,446.36	$256.32	$54.74		
PPO - 75/25 Plan - HMSA Medical	Self	$88.84	$177.68	$266.52	60.0%	$444.20	$71.16	$17.68		
Prescription Drug - CVS Caremark	Two-Party	$215.58	$431.16	$646.72	60.0%	$1,077.88	$172.62	$42.96		
RSN Chiropractic	Family	$274.76	$549.52	$824.24	60.0%	$1,373.76	$220.02	$54.74		
HMSA HMO	Self	$142.35	$284.70	$266.52	48.4%	$551.22	$124.67	$17.68		
Prescription Drug - CVS Caremark	Two-Party	$345.49	$690.98	$646.72	48.3%	$1,337.70	$302.53	$42.96		
RSN Chiropractic	Family	$440.43	$880.86	$824.24	48.3%	$1,705.10	$385.69	$54.74		
HMO - Kaiser Comprehensive Medical	Self	$106.28	$212.56	$266.52	55.6%	$479.08	$106.28			
Kaiser Prescription Drug	Two-Party	$258.43	$516.86	$646.72	55.6%	$1,163.58	$258.43			
RSN Chiropractic	Family	$329.77	$659.54	$824.24	55.6%	$1,483.78	$329.77			
HMO - Kaiser Standard Medical	Self	$36.36	$72.72	$266.52	78.6%	$339.24	$36.36			
Kaiser Prescription Drug	Two-Party	$88.51	$177.02	$646.72	78.5%	$823.74	$88.51			
RSN Chiropractic	Family	$112.99	$225.98	$824.24	78.5%	$1,050.22	$112.99			
Supplemental - Royal State National	Self	$8.50	$17.00	$25.50	60.0%	$42.50	$8.50			
Supplemental Prescription Drug	Two-Party	$21.12	$42.24	$63.34	60.0%	$105.58	$21.12			
RSN Chiropractic	Family	$23.47	$46.94	$70.40	60.0%	$117.34	$23.47			
DENTAL PLAN										
	Self	$6.42	$12.84	$19.24	60.0%	$32.08				$6.42
HDS Dental	Two-Party	$12.83	$25.66	$38.50	60.0%	$64.16				$12.83
	Family	$21.11	$42.22	$63.34	60.0%	$105.56				$21.11
VISION PLAN										
	Self	$1.28	$2.56	$3.84	60.0%	$6.40			$1.28	
VSP Vision	Two-Party	$2.37	$4.74	$7.08	59.9%	$11.82			$2.37	
	Family	$3.09	$6.18	$9.26	60.0%	$15.44			$3.09	
LIFE INSURANCE										
Royal State National Life Insurance	Employee	$0.00	$0.00	$4.12	100.0%	$4.12				