

**HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND
FOR ACTIVE EMPLOYEES FORMERLY UNDER THE HSTA VEBA
BU 05**

EFFECTIVE JULY 1, 2016

Benefit Plan	Type of Enrollment	Semi-Monthly Employee Contribution	Monthly Employee Contribution	Monthly Employer Contribution	Percent Employer	Total
MEDICAL PLANS						
HSTA VB HMSA 90/10 PPO	Self	\$155.27	\$310.54	\$273.44	46.8%	\$583.98
Prescription Drug, RSN Chiropractic, VSP Vision	Two-Party	\$375.98	\$751.96	\$661.24	46.8%	\$1,413.20
	Family	\$479.40	\$958.80	\$842.98	46.8%	\$1,801.78
HSTA VB HMSA 80/20 PPO	Self	\$95.84	\$191.68	\$273.44	58.8%	\$465.12
Prescription Drug, RSN Chiropractic, VSP Vision	Two-Party	\$231.78	\$463.56	\$661.24	58.8%	\$1,124.80
	Family	\$295.46	\$590.92	\$842.98	58.8%	\$1,433.90
HSTA VB Kaiser Comprehensive	Self	\$97.73	\$195.46	\$273.44	58.3%	\$468.90
Prescription Drug, RSN Chiropractic, VSP Vision	Two-Party	\$238.95	\$477.90	\$661.24	58.0%	\$1,139.14
	Family	\$305.38	\$610.76	\$842.98	58.0%	\$1,453.74
DENTAL PLAN						
HSTA VB HDS Dental	Self	\$6.69	\$13.38	\$20.04	60.0%	\$33.42
	Two-Party	\$13.37	\$26.74	\$40.10	60.0%	\$66.84
	Family	\$21.99	\$43.98	\$65.98	60.0%	\$109.96
HSTA VB HDS Supplemental Dental	Self	\$3.66	\$7.32	\$10.98	60.0%	\$18.30
	Two-Party	\$7.32	\$14.64	\$21.96	60.0%	\$36.60
	Family	\$10.98	\$21.96	\$32.94	60.0%	\$54.90
VISION PLAN						
HSTA VB VSP Vision	Self	\$1.30	\$2.60	\$3.90	60.0%	\$6.50
	Two-Party	\$2.41	\$4.82	\$7.20	59.9%	\$12.02
	Family	\$3.14	\$6.28	\$9.42	60.0%	\$15.70
LIFE INSURANCE						
HSTA VB US Able Life Insurance	Employee	\$0.00	\$0.00	\$4.12	100.0%	\$4.12