

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

EFFECTIVE JULY 1, 2017

Benefit Plan	Type of Enrollment	Semi-Monthly Employee Contribution	Monthly Employee Contribution	Monthly Employer Contribution	Percent Employer	Total
<b>MEDICAL PLANS</b>						
HSTA VB HMSA 90/10 PPO Prescription Drug, RSN Chiropractic, VSP Vision	Self	\$154.90	\$309.80	\$300.38	49.2%	\$610.18
	Two-Party	\$375.10	\$750.20	\$726.64	49.2%	\$1,476.84
	Family	\$478.29	\$956.58	\$926.34	49.2%	\$1,882.92
HSTA VB HMSA 80/20 PPO Prescription Drug, RSN Chiropractic, VSP Vision	Self	\$104.43	\$208.86	\$300.38	59.0%	\$509.24
	Two-Party	\$252.64	\$505.28	\$726.64	59.0%	\$1,231.92
	Family	\$322.06	\$644.12	\$926.34	59.0%	\$1,570.46
HSTA VB Kaiser Comprehensive Prescription Drug, RSN Chiropractic, VSP Vision	Self	\$107.49	\$214.98	\$300.38	58.3%	\$515.36
	Two-Party	\$260.91	\$521.82	\$726.64	58.2%	\$1,248.46
	Family	\$333.06	\$666.12	\$926.34	58.2%	\$1,592.46
<b>DENTAL PLAN</b>						
HSTA VB HDS Dental	Self	\$7.01	\$14.02	\$21.02	60.0%	\$35.04
	Two-Party	\$14.01	\$28.02	\$42.04	60.0%	\$70.06
	Family	\$23.06	\$46.12	\$69.18	60.0%	\$115.30
HSTA VB HDS Supplemental Dental	Self	\$3.86	\$7.72	\$11.56	60.0%	\$19.28
	Two-Party	\$7.71	\$15.42	\$23.14	60.0%	\$38.56
	Family	\$11.57	\$23.14	\$34.70	60.0%	\$57.84
<b>VISION PLAN</b>						
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
<b>LIFE INSURANCE</b>						
HSTA VB USAbLe Life Insurance	Employee	\$0.00	\$0.00	\$4.12	100.0%	\$4.12

<sup>1</sup> Subject to funding by Legislature.