

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

EFFECTIVE JULY 1, 2026

Benefit Plan	Type of Enrollment	Semi-Monthly Employee Contribution	Monthly Employee Contribution	Monthly Employer Contribution	Percent Employer	Total
MEDICAL PLANS						
HSTA VB - PPO - 80/20 Plan- HMSA Medical and Chiropractic, CVS Caremark Prescription Drug, VSP Vision	Self	168.09	336.18	504.24	60.0%	\$840.42
	Two-Party	407.43	814.86	1,222.26	60.0%	\$2,037.12
	Family	519.23	1,038.46	1,557.70	60.0%	\$2,596.16
HSTA VB - PPO - 90/10 Plan - HMSA Medical and Chiropractic, CVS Caremark Prescription Drug, VSP Vision	Self	258.51	517.02	504.24	49.4%	\$1,021.26
	Two-Party	626.73	1,253.46	1,222.26	49.4%	\$2,475.72
	Family	799.03	1,598.06	1,557.70	49.4%	\$3,155.76
HSTA VB - HMO - Kaiser Comprehensive Medical, Drug, Chiropractic, and VSP Vision	Self	158.04	316.08	504.24	61.5%	\$820.32
	Two-Party	384.37	768.74	1,222.26	61.4%	\$1,991.00
	Family	491.24	982.48	1,557.70	61.3%	\$2,540.18
DENTAL PLAN						
HSTA VB - HDS Dental	Self	10.30	20.60	30.88	60.0%	\$51.48
	Two-Party	20.60	41.20	61.80	60.0%	\$103.00
	Family	30.89	61.78	92.66	60.0%	\$154.44
HSTA VB - HDS Supplemental Dental	Self	4.17	8.34	12.50	60.0%	\$20.84
	Two-Party	8.34	16.68	25.02	60.0%	\$41.70
	Family	12.51	25.02	37.52	60.0%	\$62.54
VISION PLAN						
HSTA VB - VSP Vision	Self	0.84	1.68	2.52	60.0%	\$4.20
	Two-Party	1.57	3.14	4.68	59.8%	\$7.82
	Family	2.05	4.10	6.12	59.9%	\$10.22
LIFE INSURANCE						
HSTA VB - Securian Life Insurance	Employee	-	-	4.12	100.0%	\$4.12

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MEDICAL PLANS						
HSTA VB - PPO - 80/20 Plan - HMSA Medical and Chiropractic	Self	114.15	228.30	342.42	60.0%	570.72
	Two-Party	276.83	553.66	830.50	60.0%	1,384.16
	Family	352.80	705.60	1,058.40	60.0%	1,764.00
HSTA VB - PPO - 80/20 Plan - CVS Caremark Prescription Drug	Self	53.10	106.20	159.30	60.0%	265.50
	Two-Party	129.03	258.06	387.08	60.0%	645.14
	Family	164.39	328.78	493.16	60.0%	821.94
HSTA VB - PPO - 90/10 Plan - HMSA Medical and Chiropractic	Self	190.41	380.82	370.74	49.3%	751.56
	Two-Party	461.74	923.48	899.28	49.3%	1,822.76
	Family	588.74	1,177.48	1,146.12	49.3%	2,323.60
HSTA VB - PPO - 90/10 Plan - CVS Caremark Prescription Drug	Self	67.26	134.52	130.98	49.3%	265.50
	Two-Party	163.42	326.84	318.30	49.3%	645.14
	Family	208.25	416.50	405.44	49.3%	821.94
HSTA VB - HMO - Kaiser Comprehensive Medical, Drug, and Chiropractic	Self	157.20	314.40	501.72	61.5%	816.12
	Two-Party	382.80	765.60	1,217.58	61.4%	1,983.18
	Family	489.20	978.40	1,551.56	61.3%	2,529.96
DENTAL PLAN						
HSTA VB - HDS Dental	Self	10.30	20.60	30.88	60.0%	\$51.48
	Two-Party	20.60	41.20	61.80	60.0%	\$103.00
	Family	30.89	61.78	92.66	60.0%	\$154.44
HSTA VB - HDS Supplemental Dental	Self	4.17	8.34	12.50	60.0%	\$20.84
	Two-Party	8.34	16.68	25.02	60.0%	\$41.70
	Family	12.51	25.02	37.52	60.0%	\$62.54
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