

**HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND  
ACTIVE EMPLOYEES**

COUNTY OF KAUAI, KAUAI DEPARTMENT OF WATER, AND COUNTY OF MAUI  
EFFECTIVE JULY 1, 2026  
BU 00, 01, 02, 03, 04, 12, 13 AND EXCLUDED COUNTERPARTS

| Benefit Plan   | Type of Enrollment | Semi-Monthly Employee Contribution | Monthly Employee Contribution | Monthly Employer Contribution* | Percent Employer | Total      |
|--|--------------------|------------------------------------|-------------------------------|--------------------------------|------------------|------------|
| <b>MEDICAL PLANS</b>   |                    |                                    |                               |                                |                  |            |
| PPO - 75/25 Plan - HMSA Medical and Chiropractic, CVS Caremark Prescription Drug | Self               | -                                  | -                             | 635.62                         | 100.0%           | \$635.62   |
|  | Two-Party          | -                                  | -                             | 1,543.54                       | 100.0%           | \$1,543.54 |
|  | Family             | -                                  | -                             | 1,967.60                       | 100.0%           | \$1,967.60 |
| PPO - 80/20 Plan - HMSA Medical and Chiropractic, CVS Caremark Prescription Drug | Self               | 196.26                             | 392.52                        | 588.76                         | 60.0%            | \$981.28   |
|  | Two-Party          | 476.69                             | 953.38                        | 1,430.08                       | 60.0%            | \$2,383.46 |
|  | Family             | 607.73                             | 1,215.46                      | 1,823.16                       | 60.0%            | \$3,038.62 |
| PPO - 90/10 Plan - HMSA Medical and Chiropractic, CVS Caremark Prescription Drug | Self               | 292.85                             | 585.70                        | 588.76                         | 50.1%            | \$1,174.46 |
|  | Two-Party          | 711.43                             | 1,422.86                      | 1,430.08                       | 50.1%            | \$2,852.94 |
|  | Family             | 907.22                             | 1,814.44                      | 1,823.16                       | 50.1%            | \$3,637.60 |
| HMO - HMSA Medical and Chiropractic, CVS Caremark Prescription Drug              | Self               | 359.53                             | 719.06                        | 588.76                         | 45.0%            | \$1,307.82 |
|  | Two-Party          | 873.60                             | 1,747.20                      | 1,430.08                       | 45.0%            | \$3,177.28 |
|  | Family             | 1,114.04                           | 2,228.08                      | 1,823.16                       | 45.0%            | \$4,051.24 |
| HMO - Kaiser Standard Medical, Prescription Drug and Chiropractic                | Self               | -                                  | -                             | 606.46                         | 100.0%           | \$606.46   |
|  | Two-Party          | -                                  | -                             | 1,473.66                       | 100.0%           | \$1,473.66 |
|  | Family             | -                                  | -                             | 1,879.98                       | 100.0%           | \$1,879.98 |
| HMO - Kaiser Comprehensive Medical, Prescription Drug, and Chiropractic          | Self               | 149.07                             | 298.14                        | 588.76                         | 66.4%            | \$886.90   |
|  | Two-Party          | 362.54                             | 725.08                        | 1,430.08                       | 66.4%            | \$2,155.16 |
|  | Family             | 463.11                             | 926.22                        | 1,823.16                       | 66.3%            | \$2,749.38 |
| Supplemental Medical and Prescription Drug - Verdegard Administrators (fka HMA)  | Self               | -                                  | -                             | 36.44                          | 100.0%           | \$36.44    |
|  | Two-Party          | -                                  | -                             | 64.46                          | 100.0%           | \$64.46    |
|  | Family             | -                                  | -                             | 69.74                          | 100.0%           | \$69.74    |
| <b>DENTAL PLAN</b>   |                    |                                    |                               |                                |                  |            |
| HDS Dental   | Self               | -                                  | -                             | 43.22                          | 100.0%           | \$43.22    |
|  | Two-Party          | -                                  | -                             | 86.44                          | 100.0%           | \$86.44    |
|  | Family             | -                                  | -                             | 129.66                         | 100.0%           | \$129.66   |
| <b>VISION PLAN</b>   |                    |                                    |                               |                                |                  |            |
| VSP Vision   | Self               | -                                  | -                             | 4.20                           | 100.0%           | \$4.20     |
|  | Two-Party          | -                                  | -                             | 7.82                           | 100.0%           | \$7.82     |
|  | Family             | -                                  | -                             | 10.22                          | 100.0%           | \$10.22    |
| <b>LIFE INSURANCE</b>  |                    |                                    |                               |                                |                  |            |
| Securian Life Insurance  | Employee           | -                                  | -                             | 4.12                           | 100.0%           | \$4.12     |

\*Monthly employer contributions covering 100% of standard medical, prescription drug, supplemental medical and prescription drug, vision, and dental plans for County of Kauai and Kauai Department of Water employees are subject to final approval by the County of Kauai Council.

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| <b>MEDICAL PLANS</b>  |                    |                                    |                               |                                |                  |            |
| PPO - 75/25 Plan - HMSA Medical and Chiropractic                                | Self               | -                                  | -                             | 478.00                         | 100.0%           | \$478.00   |
|   | Two-Party          | -                                  | -                             | 1,160.54                       | 100.0%           | \$1,160.54 |
|   | Family             | -                                  | -                             | 1,479.64                       | 100.0%           | \$1,479.64 |
| PPO - 75/25 Plan - CVS Caremark Prescription Drug                               | Self               | -                                  | -                             | 157.62                         | 100.0%           | \$157.62   |
|   | Two-Party          | -                                  | -                             | 383.00                         | 100.0%           | \$383.00   |
|   | Family             | -                                  | -                             | 487.96                         | 100.0%           | \$487.96   |
| PPO - 80/20 Plan - HMSA Medical and Chiropractic                                | Self               | 137.59                             | 275.18                        | 412.76                         | 60.0%            | \$687.94   |
|   | Two-Party          | 334.14                             | 668.28                        | 1,002.40                       | 60.0%            | \$1,670.68 |
|   | Family             | 426.11                             | 852.22                        | 1,278.28                       | 60.0%            | \$2,130.50 |
| PPO - 80/20 Plan - CVS Caremark Prescription Drug                               | Self               | 58.67                              | 117.34                        | 176.00                         | 60.0%            | \$293.34   |
|   | Two-Party          | 142.55                             | 285.10                        | 427.68                         | 60.0%            | \$712.78   |
|   | Family             | 181.62                             | 363.24                        | 544.88                         | 60.0%            | \$908.12   |
| PPO - 90/10 Plan - HMSA Medical and Chiropractic                                | Self               | 219.71                             | 439.42                        | 441.70                         | 50.1%            | \$881.12   |
|   | Two-Party          | 533.69                             | 1,067.38                      | 1,072.78                       | 50.1%            | \$2,140.16 |
|   | Family             | 680.74                             | 1,361.48                      | 1,368.00                       | 50.1%            | \$2,729.48 |
| PPO - 90/10 Plan - CVS Caremark Prescription Drug                               | Self               | 73.14                              | 146.28                        | 147.06                         | 50.1%            | \$293.34   |
|   | Two-Party          | 177.74                             | 355.48                        | 357.30                         | 50.1%            | \$712.78   |
|   | Family             | 226.48                             | 452.96                        | 455.16                         | 50.1%            | \$908.12   |
| HMO - HMSA Medical and Chiropractic   | Self               | 278.89                             | 557.78                        | 456.70                         | 45.0%            | \$1,014.48 |
|   | Two-Party          | 677.62                             | 1,355.24                      | 1,109.26                       | 45.0%            | \$2,464.50 |
|   | Family             | 864.32                             | 1,728.64                      | 1,414.48                       | 45.0%            | \$3,143.12 |
| HMO - CVS Caremark Prescription Drug  | Self               | 80.64                              | 161.28                        | 132.06                         | 45.0%            | \$293.34   |
|   | Two-Party          | 195.98                             | 391.96                        | 320.82                         | 45.0%            | \$712.78   |
|   | Family             | 249.72                             | 499.44                        | 408.68                         | 45.0%            | \$908.12   |
| HMO - Kaiser Standard Medical, Prescription Drug and Chiropractic               | Self               | -                                  | -                             | 606.46                         | 100.0%           | \$606.46   |
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