

2021

COUNTY OF SHASTA

MEDICAL PREMIUMS, COUNTY CONTRIBUTIONS AND RETIREE COST¹

For retirees covered under the
SHERIFF'S ADMINISTRATIVE (23)

To determine your cost of insurance, first find the chart that pertains to your situation and any of the individual(s) covered by your insurance. Then find the CalPERS Plan in which you are enrolled.

Neither the retiree nor any covered individuals are in Medicare

CalPERS Basic Monthly Rates

Plan	Retiree Only	Retiree & 1 Dependent	Retiree & 2+ Dependents
PERS Choice Premium	935.84	1,871.68	2,433.18
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	792.84	1,728.68	2,290.18
Retiree reimbursement from Shasta County	792.84	1,073.59	1,438.57
Retiree Net Cost of Medical Premiums	0.00	655.09	851.61
PERS Select Premium	566.67	1,133.34	1,473.34
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	423.67	990.34	1,330.34
Retiree reimbursement from Shasta County	423.67	990.34	1,330.34
Retiree Net Cost of Medical Premiums	0.00	0.00	0.00
PERS Care Premium	1,294.69	2,589.38	3,366.19
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,151.69	2,446.38	3,223.19
Retiree reimbursement from Shasta County	792.84	1,073.59	1,438.57
Retiree Net Cost of Medical Premiums	358.85	1,372.79	1,784.62
PORAC Premium	799.00	1,725.00	2,199.00
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	656.00	1,582.00	2,056.00
Retiree reimbursement from Shasta County	656.00	1,073.59	1,438.57
Retiree Net Cost of Medical Premiums	0.00	508.41	617.43

¹Retirees hired after 01/01/2017 or those hired prior to that date that have opted in to the Shasta County's 401a Plan are eligible only for the County required minimum paid directly to CalPERS*. No reimbursement is applicable, therefore the net cost for such a retiree will be the amount of the CalPERS deduction from Retiree pension allowance**.

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To determine your cost of insurance, first find the chart that pertains to your situation and any of the individual(s) covered by your insurance. Then find the CalPERS Plan in which you are enrolled.

The retiree and all covered individuals are in Medicare			
CalPERS Supplement/Managed Medicare Monthly Rates			
Plan	Retiree Only	Retiree & 1 Dependent	Retiree & 2+ Dependents
PERS Choice Premium	349.97	699.94	1,049.91
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	206.97	556.94	906.91
Retiree reimbursement from Shasta County	206.97	556.94	906.91
Retiree Net Cost of Medical Premiums	0.00	0.00	0.00
PERS Select Premium	349.97	699.94	1,049.91
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	206.97	556.94	906.91
Retiree reimbursement from Shasta County	206.97	556.94	906.91
Retiree Net Cost of Medical Premiums	0.00	0.00	0.00
PERS Care Premium	381.25	762.50	1,143.75
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	238.25	619.50	1,000.75
Retiree reimbursement from Shasta County	238.25	619.50	1,000.75
Retiree Net Cost of Medical Premiums	0.00	0.00	0.00
PORAC Premium	513.00	1,022.00	1,635.00
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	370.00	879.00	1,492.00
Retiree reimbursement from Shasta County	370.00	879.00	1,438.57
Retiree Net Cost of Medical Premiums	0.00	0.00	53.43

¹Retirees hired after 01/01/2017 or those hired prior to that date that have opted in to the Shasta County's 401a Plan are eligible only for the County required minimum paid directly to CalPERS*. No reimbursement is applicable, therefore the net cost for such a retiree will be the amount of the CalPERS deduction from Retiree pension allowance**.

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To determine your cost of insurance, first find the chart that pertains to your situation and any of the individual(s) covered by your insurance. Then find the CalPERS Plan in which you are enrolled.

Retiree is in Medicare with at least one covered dependent who is not in Medicare			
CalPERS Combination (Basic and Supplement/Managed Medicare) Monthly Rates			
Plan	1 dependent who is not in Medicare	2+ dependents who are not in Medicare	2+ dependents with at least 1 not in Medicare
PERS Choice Premium	1,285.81	1,847.31	1,261.44
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,142.81	1,704.31	1,118.44
Retiree reimbursement from Shasta County	1,073.59	1,438.57	1,118.44
Retiree Net Cost of Medical Premiums	69.22	265.74	0.00
PERS Select Premium	916.64	1,256.64	1,039.94
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	773.64	1,113.64	896.94
Retiree reimbursement from Shasta County	773.64	1,113.64	896.94
Retiree Net Cost of Medical Premiums	0.00	0.00	0.00
PERS Care Premium	1,675.94	2,452.75	1,539.31
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,532.94	2,309.75	1,396.31
Retiree reimbursement from Shasta County	1,073.59	1,438.57	1,396.31
Retiree Net Cost of Medical Premiums	459.35	871.18	0.00
PORAC Premium	1,439.00	1,913.00	1,496.00
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,296.00	1,770.00	1,353.00
Retiree reimbursement from Shasta County	1,073.59	1,438.57	1,353.00
Retiree Net Cost of Medical Premiums	222.41	331.43	0.00

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To determine your cost of insurance, first find the chart that pertains to your situation and any of the individual(s) covered by your insurance. Then find the CalPERS Plan in which you are enrolled.

Retiree is <u>not</u> in Medicare with at least one covered dependent who is in Medicare			
CalPERS Combination (Basic and Supplement/Managed Medicare) Monthly Rates			
Plan	1 dependent who is in Medicare	2+ dependents who are all in Medicare	2+ dependents with at least 1 in Medicare
PERS Choice Premium	1,285.81	1,635.78	1,847.31
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,142.81	1,492.78	1,704.31
Retiree reimbursement from Shasta County	1,073.59	1,438.57	1,438.57
Retiree Net Cost of Medical Premiums	69.22	54.21	265.74
PERS Select Premium	916.64	1,266.61	1,256.64
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	773.64	1,123.61	1,113.64
Retiree reimbursement from Shasta County	773.64	1,123.61	1,113.64
Retiree Net Cost of Medical Premiums	0.00	0.00	0.00
PERS Care Premium	1,675.94	2,057.19	2,452.75
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,532.94	1,914.19	2,309.75
Retiree reimbursement from Shasta County	1,073.59	1,438.57	1,438.57
Retiree Net Cost of Medical Premiums	459.35	475.62	871.18
PORAC Premium	1,308.00	1,825.00	1,782.00
County required minimum paid directly to CalPERS*	143.00	143.00	143.00
CalPERS deduction from Retiree pension allowance**	1,165.00	1,682.00	1,639.00
Retiree reimbursement from Shasta County	1,073.59	1,438.57	1,438.57
Retiree Net Cost of Medical Premiums	91.41	243.43	200.43

¹Retirees hired after 01/01/2017 or those hired prior to that date that have opted in to the Shasta County's 401a Plan are eligible only for the County required minimum paid directly to CalPERS*. No reimbursement is applicable, therefore the net cost for such a retiree will be the amount of the CalPERS deduction from Retiree pension allowance**.