

2022

**COUNTY OF SHASTA
RETIREE HEALTHCARE PREMIUMS
TEAMSTERS - TRADES AND CRAFTS UNIT (07)**

PLAN COVERAGE	MONTHLY PREMIUM PER PERSON	MONTHLY PREMIUM	PERS Choice Retiree County Monthly Contribution <i>(Health + Dental) *</i>	RETIREE MONTHLY PREMIUM Paid x Trust Fund	MONTHLY INVOICE PER PERSON
Single No Medicare	\$400.00	\$400.00	\$735.28	\$0.00	\$735.28
Single with Medicare	\$275.00	\$275.00	\$411.46	\$0.00	\$411.46
2 Party 1 with & 1 No Medicare		\$675.00	\$1,127.42	\$0.00	
with Medicare	\$275.00				\$401.80
without Medicare	\$400.00				\$725.62
2 party neither with Medicare		\$800.00	\$1,310.98	\$0.00	
without Medicare	\$400.00				\$655.49
without Medicare	\$400.00				\$655.49
2 Party both with Medicare		\$550.00	\$803.60	\$0.00	
with Medicare	\$275.00				\$401.80
with Medicare	\$275.00				\$401.80

For questions regarding Teamster Health options, please contact the Teamster Office.
Heather McFall @ 530-243-0232