## COUNTY OF SHASTA MEDICAL PREMIUMS, COUNTY CONTRIBUTIONS AND RETIREE COST<sup>1</sup> For retirees covered under the

**BOARD OF SUPERVISORS (10)** 

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				
PERS Gold Premium	701.23	1,402.46	1,823.20	
County required minimum paid directly to CalPERS*	149.00	149.00	149.00	
CalPERS deduction from Retiree pension allowance**	552.23	1,253.46	1,674.20	
Retiree reimbursement from Shasta County	552.23	1,067.59	1,432.57	
Retiree Net Cost of Medical Premiums	-	185.87	241.63	
PERS Platinum Premium	1,057.01	2,114.02	2,748.23	
County required minimum paid directly to CalPERS*	149.00	149.00	149.00	
CalPERS deduction from Retiree pension allowance**	908.01	1,965.02	2,599.23	
Retiree reimbursement from Shasta County	646.46	1,067.59	1,432.57	
Retiree Net Cost of Medical Premiums	261.55	897.43	1,166.66	
BLUE SHIELD (EPO)	1,116.01	2,232.02	2,901.63	
County required minimum paid directly to CalPERS*	149.00	149.00	149.00	
CalPERS deduction from Retiree pension allowance**	967.01	2,083.02	2,752.63	
Retiree reimbursement from Shasta County	646.46	1,067.59	1,432.57	
Retiree Net Cost of Medical Premiums	320.55	1,015.43	1,320.06	

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The retiree and all covered individuals are in Medicare CalPERS Supplement/Managed Medicare Monthly Rates				
PERS Gold Premium	377.41	754.82	1,132.23	
County required minimum paid directly to CalPERS*	149.00	149.00	149.00	
CalPERS deduction from Retiree pension allowance**	228.41	605.82	983.23	
Retiree reimbursement from Shasta County	228.41	605.82	983.23	
Retiree Net Cost of Medical Premiums	0.00	0.00	0.00	
PERS Platinum Premium	381.94	763.88	1,145.82	
County required minimum paid directly to CalPERS*	149.00	149.00	149.00	
CalPERS deduction from Retiree pension allowance**	232.94	614.88	996.82	
Retiree reimbursement from Shasta County	232.94	614.88	996.82	
Retiree Net Cost of Medical Premiums	0.00	0.00	0.00	
BLUE SHIELD (EPO)	353.11	706.22	1,059.33	
County required minimum paid directly to CalPERS*	149.00	149.00	149.00	
CalPERS deduction from Retiree pension allowance**	204.11	557.22	910.33	
Retiree reimbursement from Shasta County	204.11	557.22	910.33	
Retiree Net Cost of Medical Premiums	0.00	0.00	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 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 Gold Premium	1,078.64	1,499.38	1,175.56		
County required minimum paid directly to CalPERS*	149.00	149.00	149.00		
CalPERS deduction from Retiree pension allowance**	929.64	1,350.38	1,026.56		
Retiree reimbursement from Shasta County	929.64	1,350.38	1,026.56		
Retiree Net Cost of Medical Premiums	0.00	0.00	0.00		
PERS Platinum Premium	1,438.95	2,073.16	1,398.09		
County required minimum paid directly to CalPERS*	149.00	149.00	149.00		
CalPERS deduction from Retiree pension allowance**	1,289.95	1,924.16	1,249.09		
Retiree reimbursement from Shasta County	1,067.59	1,432.57	1,249.09		
Retiree Net Cost of Medical Premiums	222.36	491.59	0.00		
BLUE SHIELD (EPO)	1,469.12	2,138.73	1,375.83		
County required minimum paid directly to CalPERS*	149.00	149.00	149.00		
CalPERS deduction from Retiree pension allowance**	1,320.12	1,989.73	1,226.83		
Retiree reimbursement from Shasta County	1,067.59	1,432.57	1,226.83		
Retiree Net Cost of Medical Premiums	252.53	557.16	0.00		

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Retiree is not 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 Gold Premium	1,078.64	1,456.05	1,499.38		
County required minimum paid directly to CalPERS*	149.00	149.00	149.00		
CalPERS deduction from Retiree pension allowance**	929.64	1,307.05	1,350.38		
Retiree reimbursement from Shasta County	929.64	1,307.05	1,350.38		
Retiree Net Cost of Medical Premiums	0.00	0.00	0.00		
PERS Platinum Premium	1,438.95	1,820.89	2,073.16		
County required minimum paid directly to CalPERS*	149.00	149.00	149.00		
CalPERS deduction from Retiree pension allowance**	1,289.95	1,671.89	1,924.16		
Retiree reimbursement from Shasta County	1,067.59	1,432.57	1,432.57		
Retiree Net Cost of Medical Premiums	222.36	239.32	491.59		
BLUE SHIELD (EPO)	1,469.12	1,822.23	2,138.73		
County required minimum paid directly to CalPERS*	149.00	149.00	149.00		
CalPERS deduction from Retiree pension allowance**	1,320.12	1,673.23	1,989.73		
Retiree reimbursement from Shasta County	1,067.59	1,432.57	1,432.57		
Retiree Net Cost of Medical Premiums	252.53	240.66	557.16		