

San Benito County

2024 Reimbursement Rate Sheet for Retirees Effective: January 1, 2024

County Rei	Monthly County Reimbursement *2024 PEMHCA included				
Bargaining Unit and Hire Date					
Bargaining Unit At the Time of Retirement	Medicare Status	Tier	2024 PEMHCA Minimum	Additional County Contribution	Total County Reimbursement
General Unit (SEIU) Hired on or before September 30, 2013	Medicare	Employee	\$157	\$368.00	\$525.00
		Employee+ 1	\$157	\$718.00	\$875.00
		Family	\$157	\$903.50	\$1,060.50
	Non-Medicare	Employee	\$157	\$593.00	\$750.00
		Employee+1	\$157	\$1,093.00	\$1,250.00
		Family	\$157	\$1,358.00	\$1,515.00
Deputy Sheriff's Association (DSA) *Hired on or before March 23, 2016	Medicare	Employee	\$157	\$228.00	\$385.00
		Employee+1	\$157	\$578.00	\$735.00
		Family	\$157	\$763.50	\$920.50
	Non-Medicare	Employee	\$157	\$393.00	\$550.00
		Employee+1	\$157	\$893.00	\$1,050.00
		Family	\$157	\$1,158.00	\$1,315.00
Law Enforcement Management (LEM) *Hired on or before September 30, 2014	Medicare	Employee	\$157	\$368.00	\$525.00
		Employee+1	\$157	\$718.00	\$875.00
		Family	\$157	\$903.50	\$1,060.50
	Non-Medicare	Employee	\$157	\$593.00	\$750.00
		Employee+1	\$157	\$1,093.00	\$1,250.00
		Family	\$157	\$1,358.00	\$1,515.00
Institutions Association (IA)	Medicare	Employee	\$157	\$228.00	\$385.00
		Employee+ 1	\$157	\$578.00	\$735.00
		Family	\$157	\$763.50	\$920.50
*Hired on or before September 30, 2013	Non-Medicare	Employee	\$157	\$393.00	\$550.00
		Employee+ 1	\$157	\$893.00	\$1,050.00
		Family	\$157	\$1,158.00	\$1,315.00
Management Employees Group (MEG) *Hired on or before September 30, 2013	Medicare	Employee	\$157	\$368.00	\$525.00
		Employee+1	\$157	\$718.00	\$875.00
		Family	\$157	\$903.50	\$1,060.50
	Non-Medicare	Employee	\$157	\$593.00	\$750.00
		Employee+1	\$157	\$1,093.00	\$1,250.00
		Family	\$157	\$1,358.00	\$1,515.00
Elected Department Heads *Elected on or before March 22, 2016	Medicare	Employee	\$157	\$368.00	\$525.00
		Employee+1	\$157	\$718.00	\$875.00
		Family	\$157	\$903.50	\$1,060.50
	Non-Medicare	Employee	\$157	\$593.00	\$750.00
		Employee+ 1	\$157	\$1,093.00	\$1,250.00
		Family	\$157	\$1,358.00	\$1,515.00
Appointed Department	Medicare	Employee	\$157	\$368.00	\$525.00
		Employee+1	\$157	\$718.00	\$875.00
Heads		Family	\$157	\$903.50	\$1,060.50
*Hired on or before	Non-Medicare	Employee	\$157	\$593.00	\$750.00
December 15, 2015		Employee+1	\$157	\$1,093.00	\$1,250.00
		Family	\$157	\$1,358.00	\$1,515.00
Unrepresented	Medicare	Employee	\$157	\$368.00	\$525.00
		Employee+ 1	\$157	\$718.00	\$875.00
		Family	\$157	\$903.50	\$1,060.50
(Confidential Employees) *Hired on or before November 17, 2015	Non-Medicare	Employee	\$157	\$593.00	\$750.00
		Employee+1	\$157	\$1,093.00	\$1,250.00
		Family	\$157	\$1,358.00	\$1,515.00

^{*}Employees hired after the date determined by the Bargaining Unit shall only receive a monthly County Contribution equal to the PEMHCA minimum upon retirement from the County. For 2024 plan information, visit www.cosb.us.