

**Santa Barbara County Superior Court  
2021 HEALTH INSURANCE PREMIUMS  
Twice-Monthly Premiums for Full-Time Regular Employees**  
\*Court Contribution will be Pro-rated for Part-Time Employees  
**Effective January 1, 2021**

**MEDICAL PLANS**

EPO Group #E10063	Medical Premium	Court Contribution*	Pre-Tax Employee Cost	After-Tax Employee Cost
Employee Only	389.58	(389.58)	0.00	
with 1 Dependent	722.08	(389.58)	332.50	
Two + Dependents	1,132.58	(389.58)	743.00	
Employee +Domestic Partner	722.08	(389.58)	0.00	332.50
Employee + 1 Dep & Dom. Prtnr	1,132.58	(389.58)	332.50	410.50
Employee + 2 or more Dep & Dom Ptnr	1,132.58	(389.58)	743.00	

High Deductible PPO (HDHP) Group #E10065	Medical Premium	Court Contribution*	Pre-Tax Employee Cost	After-Tax Employee Cost
Employee Only	344.58	(344.58)	0.00	
with 1 Dependent	636.58	(344.58)	292.00	
Two + Dependents	1,001.08	(344.58)	656.50	
Employee +Domestic Partner	636.58	(344.58)	0.00	292.00
Employee + 1 Dep & Dom. Prtnr	1,001.08	(344.58)	292.00	364.50
Employee + 2 or more Dep & Dom Ptnr	1,001.08	(344.58)	656.50	

**DENTAL PLANS**

Delta Dental PPO-Group 16479	Dental Premium	Court Contribution*	Pre-Tax Employee Cost	After-Tax Employee Cost
Employee Only	22.50	(13.02)	9.48	
with 1 Dependent	43.20	(13.02)	30.18	
Two + Dependents	66.40	(13.02)	53.38	
Employee +Domestic Partner	43.20	(13.02)	9.48	20.70
Employee + 1 Dep & Dom. Prtnr	66.40	(13.02)	30.18	23.20
Employee + 2 or more Dep & Dom Ptnr	66.40	(13.02)	53.38	

Delta Dental HMO DeltaCare USA	Dental Premium	Court Contribution*	Pre-Tax Employee Cost	After-Tax Employee Cost
Employee Only	20.16	(13.02)	7.14	
with 1 Dependent	33.16	(13.02)	20.14	
Two + Dependents	50.32	(13.02)	37.30	
Employee +Domestic Partner	33.15	(13.02)	7.14	12.99
Employee + 1 Dep & Dom. Prtnr	50.32	(13.02)	20.14	17.16
Employee + 2 or more Dep & Dom Ptnr	50.32	(13.02)	37.30	

**VISION PLAN**

VISION SERVICE PLAN (VSP)	Vision Premium	Pre-Tax Employee Cost	After-Tax Employee Cost
Employee Only	3.50	3.50	
with 1 Dependent	4.90	4.90	
Two + Dependents	8.65	8.65	
Employee +Domestic Partner	4.90	3.50	1.40
Employee + 1 Dep & Dom. Prtnr	8.65	4.90	3.75
Employee + 2 or more Dep & Dom Ptnr	8.65	8.65	