

## AETNA TRADITIONAL PLAN - 2025 RATES

Effective January 1 - December 31, 2025

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	COBRA Rate
<b>Most Employee, Library, &amp; SHA</b>	\$1,928.38	\$1,928.38	\$1,966.95
City Share & RSR Contribution	\$1,928.38	\$1,896.04	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$32.34</b>	<b>\$1,966.95</b>
<b>LEOFF I (Non-Represented)</b>	\$1,566.90	\$1,566.90	\$1,598.24
City Share & RSR Contribution	\$1,566.90	\$1,534.56	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$32.34</b>	<b>\$1,598.24</b>
<b>LEOFF II (Non-Represented)</b>	\$1,928.38	\$1,928.38	\$1,966.95
City Share & RSR Contribution	\$1,928.38	\$1,896.04	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$32.34</b>	<b>\$1,966.95</b>
<b>SPMA (LEOFF I)</b>	\$1,566.90	\$1,566.90	\$1,598.24
City Share & RSR Contribution	\$1,566.90	\$1,534.56	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$32.34</b>	<b>\$1,598.24</b>
<b>SPMA (LEOFF II)</b>	\$1,928.38	\$1,928.38	\$1,966.95
City Share & RSR Contribution	\$1,928.38	\$1,896.04	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$32.34</b>	<b>\$1,966.95</b>
<b>SPMA Buy Up to SPOG Plan (LEOFF II)</b>	\$2,382.58	\$2,382.58	\$2,430.23
City Share & RSR Contribution	\$1,928.38	\$1,896.04	\$0.00
Employee Deduction	<b>\$454.20</b>	<b>\$486.54</b>	<b>\$2,430.23</b>
<b>Local 77</b>	\$2,733.67	\$2,733.67	\$2,788.34
City Share	\$2,460.29	\$2,460.29	\$0.00
Employee Deduction	<b>\$273.38</b>	<b>\$273.38</b>	<b>\$2,788.34</b>
<b>Local 77 - Most Plan Design</b>	\$2,159.08	\$2,159.08	\$2,202.26
City Share	\$2,159.08	\$2,126.74	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$32.34</b>	<b>\$2,202.26</b>
<b>CMEO / Material Controllers (080 &amp; 079)</b>	\$1,928.38	\$1,928.38	\$1,966.95
City Share	\$1,912.04	\$1,897.70	\$0.00
Employee Deduction	<b>\$16.34</b>	<b>\$30.68</b>	<b>\$1,966.95</b>
<b>SPOG (LEOFF II)</b>	\$2,382.58	\$2,382.58	\$2,430.23
City Share	\$2,263.44	\$2,263.44	\$0.00
Employee Deduction	<b>\$119.14</b>	<b>\$119.14</b>	<b>\$2,430.23</b>
<b>Fire Chiefs (LEOFF II)</b>	\$1,928.38	\$1,928.38	\$1,966.95
City Share	\$1,928.38	\$1,735.54	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$192.84</b>	<b>\$1,966.95</b>

## KAISER PERMANENTE STANDARD - 2025 RATES

Effective January 1 - December 31, 2025

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	COBRA Rate
<b>Most Employee, Library, &amp; SHA</b>	\$1,572.69	\$1,572.69	\$1,604.14
City Share & RSR Contribution	\$1,524.29	\$1,472.79	\$0.00
Employee Deduction	<b>\$48.40</b>	<b>\$99.90</b>	<b>\$1,604.14</b>
<b>LEOFF I (Non Represented)</b>	\$1,572.69	\$1,572.69	\$1,604.14
City Share & RSR Contribution	\$1,572.69	\$1,521.19	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$51.50</b>	<b>\$1,604.14</b>
<b>LEOFF II (Non Represented)</b>	\$1,572.69	\$1,572.69	\$1,604.14
City Share & RSR Contribution	\$1,524.29	\$1,472.79	\$0.00
Employee Deduction	<b>\$48.40</b>	<b>\$99.90</b>	<b>\$1,604.14</b>
<b>SPMA (LEOFF I)</b>	\$1,572.69	\$1,572.69	\$1,604.14
City Share & RSR Contribution	\$1,572.69	\$1,521.19	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$51.50</b>	<b>\$1,604.14</b>
<b>SPMA (LEOFF II)</b>	\$1,572.69	\$1,572.69	\$1,604.14
City Share & RSR Contribution	\$1,524.29	\$1,472.79	\$0.00
Employee Deduction	<b>\$48.40</b>	<b>\$99.90</b>	<b>\$1,604.14</b>
<b>SPMA Buy up to SPOG Plan (LEOFF II)</b>	\$1,934.46	\$1,934.46	\$1,973.15
City Share & RSR Contribution	\$1,448.35	\$1,472.78	\$0.00
Employee Deduction	<b>\$410.18</b>	<b>\$461.68</b>	<b>\$1,973.15</b>
<b>Local 77</b>	\$1,786.05	\$1,786.05	\$1,821.77
City Share	\$1,607.43	\$1,607.43	\$0.00
Employee Deduction	<b>\$178.62</b>	<b>\$178.62</b>	<b>\$1,821.77</b>
<b>Local 77 - Most Plan Design</b>	\$1,578.50	\$1,578.50	\$1,610.07
City Share	\$1,530.10	\$1,478.60	\$0.00
Employee Deduction	<b>\$48.40</b>	<b>\$99.90</b>	<b>\$1,610.07</b>
<b>CMEO / Material Controllers (080 &amp; 079)</b>	\$1,572.69	\$1,572.69	\$1,604.14
City Share	\$1,536.23	\$1,506.37	\$0.00
Employee Deduction	<b>\$36.46</b>	<b>\$66.32</b>	<b>\$1,604.14</b>
<b>SPOG (LEOFF II)</b>	\$1,934.46	\$1,934.46	\$1,973.15
City Share	\$1,837.74	\$1,837.74	\$0.00
Employee Deduction	<b>\$96.72</b>	<b>\$96.72</b>	<b>\$1,973.15</b>
<b>Fire Chiefs (LEOFF II)</b>	\$1,572.69	\$1,572.69	\$1,604.14
City Share	\$1,415.41	\$1,415.41	\$0.00
Employee Deduction	<b>\$157.28</b>	<b>\$157.28</b>	<b>\$1,604.14</b>

## KAISER PERMANENTE DEDUCTIBLE - 2025 RATES

Effective January 1 - December 31, 2025

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	COBRA Rate
<b>Most Employee, Library, &amp; SHA</b>	\$1,449.40	\$1,449.40	\$1,478.39
City Share & RSR Contribution	\$1,424.40	\$1,392.48	\$0.00
Employee Deduction	<b>\$25.00</b>	<b>\$56.92</b>	<b>\$1,478.39</b>
<b>LEOFF I (Non-Represented)</b>	\$1,449.40	\$1,449.40	\$1,478.39
City Share & RSR Contribution	\$1,449.40	\$1,417.48	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$31.92</b>	<b>\$1,478.39</b>
<b>LEOFF II (Non-Represented)</b>	\$1,449.40	\$1,449.40	\$1,478.39
City Share & RSR Contribution	\$1,424.40	\$1,392.48	\$0.00
Employee Deduction	<b>\$25.00</b>	<b>\$56.92</b>	<b>\$1,478.39</b>
<b>SPMA (LEOFF I)</b>	\$1,449.40	\$1,449.40	\$1,478.39
City Share & RSR Contribution	\$1,449.40	\$1,417.48	\$0.00
Employee Deduction	<b>\$0</b>	<b>\$31.92</b>	<b>\$1,478.39</b>
<b>SPMA (LEOFF II)</b>	\$1,449.40	\$1,449.40	\$1,478.39
City Share & RSR Contribution	\$1,424.40	\$1,392.48	\$0.00
Employee Deduction	<b>\$25.00</b>	<b>\$56.92</b>	<b>\$1,478.39</b>
<b>SPMA Buy up to SPOG Plan (LEOFF II)</b>	\$1,433.95	\$1,433.95	\$1,462.63
City Share & RSR Contribution	\$1,424.39	\$1,392.47	\$0.00
Employee Deduction	<b>\$9.56</b>	<b>\$41.48</b>	<b>\$1,462.63</b>
<b>Local 77</b>	N/A	N/A	N/A
<b>CMEO / Material Controllers (080 &amp; 079)</b>	\$1,449.40	\$1,449.40	\$1,478.39
City Share	\$1,427.14	\$1,408.64	\$0.00
Employee Deduction	<b>\$22.26</b>	<b>\$40.76</b>	<b>\$1,478.39</b>
<b>SPOG (LEOFF II)</b>	\$1,433.95	\$1,433.95	\$1,462.63
City Share	\$1,362.25	\$1,362.25	\$0.00
Employee Deduction	<b>\$71.70</b>	<b>\$71.70</b>	<b>\$1,462.63</b>
<b>Fire Chiefs (LEOFF II)</b>	\$1,449.40	\$1,449.40	\$1,478.39
City Share	\$1,304.46	\$1,304.46	\$0.00
Employee Deduction	<b>\$144.94</b>	<b>\$144.94</b>	<b>\$1,478.39</b>

**AETNA PREVENTIVE PLAN - 2025 RATES**  
**Effective January 1 - December 31, 2025**

<b>Employee Group</b>	<b>Single Employee with or without Children</b>	<b>Employee with Spouse/Domestic Partner with or without Children</b>	<b>COBRA Rate</b>
<b>Most Employee, Library, &amp; SHA</b>	\$2,141.15	\$2,141.15	\$2,183.97
City Share & RSR Contribution	\$2,093.03	\$2,042.65	\$0.00
Employee Deduction	<b>\$48.12</b>	<b>\$98.50</b>	<b>\$2,183.97</b>
<b>LEOFF I (Non-Represented)</b>	\$2,141.15	\$2,141.15	\$2,183.97
City Share & RSR Contribution	\$2,141.15	\$2,090.77	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$50.38</b>	<b>\$2,183.97</b>
<b>LEOFF II (Non-Represented)</b>	\$2,141.15	\$2,141.15	\$2,183.97
City Share & RSR Contribution	\$2,093.03	\$2,042.65	\$0.00
Employee Deduction	<b>\$48.12</b>	<b>\$98.50</b>	<b>\$2,183.97</b>
<b>SPMA (LEOFF I)</b>	\$2,141.15	\$2,141.15	\$2,183.97
City Share & RSR Contribution	\$2,141.15	\$2,090.77	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$50.38</b>	<b>\$2,183.97</b>
<b>SPMA (LEOFF II)</b>	\$2,141.15	\$2,141.15	\$2,183.97
City Share & RSR Contribution	\$2,093.03	\$2,042.65	\$0.00
Employee Deduction	<b>\$48.12</b>	<b>\$98.50</b>	<b>\$2,183.97</b>
<b>SPMA Buy up to SPOG Plan (LEOFF II)</b>	\$2,672.30	\$2,672.30	\$2,725.75
City Share & RSR Contribution	\$2,093.02	\$2,042.64	\$0.00
Employee Deduction	<b>\$579.28</b>	<b>\$629.66</b>	<b>\$2,725.75</b>
<b>Local 77</b>	\$2,684.62	\$2,684.62	\$2,738.31
City Share	\$2,416.16	\$2,416.16	\$0.00
Employee Deduction	<b>\$268.46</b>	<b>\$268.46</b>	<b>\$2,738.31</b>
<b>Local 77 - Most Plan Design</b>	\$2,141.62	\$2,141.62	\$2,184.45
City Share	\$2,093.50	\$2,043.12	\$0.00
Employee Deduction	<b>\$48.12</b>	<b>\$98.50</b>	<b>\$2,184.45</b>
<b>CMEO / Material Controllers (080 &amp; 079)</b>	\$2,141.15	\$2,141.15	\$2,183.97
City Share	\$2,100.59	\$2,072.33	\$0.00
Employee Deduction	<b>\$40.56</b>	<b>\$68.82</b>	<b>\$2,183.97</b>
<b>SPOG (LEOFF II)</b>	\$2,672.30	\$2,672.30	\$2,725.75
City Share	\$2,538.68	\$2,538.68	\$0.00
Employee Deduction	<b>\$133.62</b>	<b>\$133.62</b>	<b>\$2,725.75</b>
<b>Fire Chiefs (LEOFF II)</b>	\$2,141.15	\$2,141.15	\$2,183.97
City Share	\$1,927.03	\$1,927.03	\$0.00
Employee Deduction	<b>\$214.12</b>	<b>\$214.12</b>	<b>\$2,183.97</b>

## DELTA DENTAL OF WA 2025 RATES

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	COBRA Rate
<b>Most Employee, Library, &amp; SHA</b>	\$121.85	\$121.85	\$124.29
City Share	\$121.85	\$121.85	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$124.29</b>
<b>LEOFF II (Non-Represented)</b>	\$121.85	\$121.85	\$124.29
City Share	\$121.85	\$121.85	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$124.29</b>
<b>SPMA (LEOFF I &amp; II)</b>	\$121.85	\$121.85	\$124.29
City Share	\$121.85	\$121.85	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$124.29</b>
<b>SPMA Buy up to SPOG Plan (LEOFF II)</b>	\$139.85	\$139.85	\$142.65
City Share & RSR Contribution	\$121.85	\$121.85	\$0.00
Employee Deduction	<b>\$18.00</b>	<b>\$18.00</b>	<b>\$142.65</b>
<b>Local 77</b>	\$126.12	\$126.12	\$128.64
City Share	\$126.12	\$126.12	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$128.64</b>
<b>CMEO / Material Controllers (080 &amp; 079)</b>	\$120.91	\$120.91	\$123.33
City Share	\$120.91	\$120.91	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$123.33</b>
<b>SPOG (LEOFF II)</b>	\$139.85	\$139.85	\$142.65
City Share	\$139.85	\$139.85	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$142.65</b>
<b>Fire Chiefs (LEOFF II)</b>	\$121.85	\$121.85	\$124.29
City Share	\$109.67	\$109.67	\$0.00
Employee Deduction	<b>\$12.18</b>	<b>\$12.18</b>	<b>\$124.29</b>

## DENTAL HEALTH SERVICES 2025 RATES

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	COBRA Rate
<b>Most Employee, Library, &amp; SHA</b>	\$142.65	\$142.65	\$145.50
City Share	\$142.65	\$142.65	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$145.50</b>
<b>LEOFF II (Non-Represented)</b>	\$142.65	\$142.65	\$145.50
City Share	\$142.65	\$142.65	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$145.50</b>
<b>SPMA (LEOFF I &amp; II)</b>	\$142.65	\$142.65	\$145.50
City Share	\$142.65	\$142.65	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$145.50</b>
<b>SPMA Buy up to SPOG Plan (LEOFF II)</b>	\$155.50	\$155.50	\$158.61
City Share & RSR Contribution	\$142.65	\$142.65	\$0.00
Employee Deduction	<b>\$12.85</b>	<b>\$12.85</b>	<b>\$158.61</b>
<b>Local 77</b>	\$155.50	\$155.50	\$158.61
City Share	\$155.50	\$155.50	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$158.61</b>
<b>CMEO / Material Controllers (080 &amp; 079)</b>	\$142.65	\$142.65	\$145.50
City Share	\$142.65	\$142.65	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$145.50</b>
<b>SPOG (LEOFF II)</b>	\$155.50	\$155.50	\$158.61
City Share	\$155.50	\$155.50	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$158.61</b>
<b>Fire Chiefs (LEOFF II)</b>	\$142.65	\$142.65	\$145.50
City Share	\$128.37	\$128.37	\$0.00
Employee Deduction	<b>\$14.26</b>	<b>\$14.26</b>	<b>\$145.50</b>

## VISION SERVICE BASIC PLAN 2025 RATES

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	COBRA Rate
<b>Most Employee, Library, &amp; SHA</b>	\$9.47	\$9.47	\$9.66
City Share	\$9.47	\$9.47	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$9.66</b>
<b>LEOFF II (Non-Represented)</b>	\$9.47	\$9.47	\$9.66
City Share	\$9.47	\$9.47	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$9.66</b>
<b>SPMA (LEOFF I &amp; II)</b>	\$9.47	\$9.47	\$9.66
City Share	\$9.47	\$9.47	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$9.66</b>
<b>SPMA Buy up to SPOG Plan</b>	\$28.85	\$28.85	\$29.43
City Share & RSR Contribution	\$9.47	\$9.47	\$0.00
Employee Deduction	<b>\$19.38</b>	<b>\$19.38</b>	<b>\$29.43</b>
<b>Local 77</b>	\$11.87	\$11.87	\$12.11
City Share	\$11.87	\$11.87	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$12.11</b>
<b>CMEO / Material Controllers (080 &amp; 079)</b>	\$9.47	\$9.47	\$9.66
City Share	\$9.47	\$9.47	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$9.66</b>
<b>SPOG (LEOFF II)</b>	\$28.85	\$28.85	\$29.43
City Share	\$28.85	\$28.85	\$0.00
Employee Deduction	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$29.43</b>
<b>Fire Chiefs (LEOFF II)</b>	\$9.47	\$9.47	\$9.66
City Share	\$8.53	\$8.53	\$0.00
Employee Deduction	<b>\$0.94</b>	<b>\$0.94</b>	<b>\$9.66</b>

## VISION SERVICE BUY UP PLAN 2025 RATES

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	COBRA Rate
<b>Most Employee, Library, &amp; SHA</b> City Share Employee Deduction	\$20.39 \$9.47 <b>\$10.92</b>	\$20.39 \$9.47 <b>\$10.92</b>	\$20.80 \$0.00 <b>\$20.80</b>
<b>LEOFF II (Non-Represented)</b> City Share Employee Deduction	\$20.39 \$9.47 <b>\$10.92</b>	\$20.39 \$9.47 <b>\$10.92</b>	\$20.80 \$0.00 <b>\$20.80</b>
<b>SPMA (LEOFF I &amp; II)</b> City Share Employee Deduction	\$20.39 \$9.47 <b>\$10.92</b>	\$20.39 \$9.47 <b>\$10.92</b>	\$20.80 \$0.00 <b>\$20.80</b>
<b>Local 77</b> City Share Employee Deduction	N/A	N/A	N/A
<b>CMEO / Material Controllers (080 &amp; 079)</b> City Share Employee Deduction	\$20.39 \$9.47 <b>\$10.92</b>	\$20.39 \$9.47 <b>\$10.92</b>	\$20.80 \$0.00 <b>\$20.80</b>
<b>SPOG (LEOFF II)</b> City Share Employee Deduction	N/A	N/A	N/A
<b>Fire Chiefs (LEOFF II)</b> City Share Employee Deduction	\$20.39 \$9.47 <b>\$10.92</b>	\$20.39 \$9.47 <b>\$10.92</b>	\$20.80 \$0.00 <b>\$20.80</b>



**DOMESTIC PARTNER HEALTH INSURANCE  
2025 MONTHLY TAXABLE VALUES**

<b>Most City Employees</b>	<b>Medical</b>	<b>Delta Dental of WA</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total with Vision Basic</b>	<b>Total with Vision Buy-Up</b>
Preventive - Domestic Partner	\$1,022.60	\$57.77	\$4.49	\$9.67	<b>\$1,084.86</b>	<b>\$1,090.04</b>
Traditional - Domestic Partner	\$934.02	\$57.77	\$4.49	\$9.67	<b>\$996.28</b>	<b>\$1,001.46</b>
Kaiser Permanente Standard - Domestic Partner	\$736.61	\$57.77	\$4.49	\$9.67	<b>\$798.87</b>	<b>\$804.05</b>
Kaiser Permanente Deductible - Domestic Partner	\$694.41	\$57.77	\$4.49	\$9.67	<b>\$756.67</b>	<b>\$761.85</b>
Preventive - Child	\$858.38	\$40.44	\$3.14	\$6.77	<b>\$901.96</b>	<b>\$905.59</b>
Traditional - Child	\$773.08	\$40.44	\$3.14	\$6.77	<b>\$816.66</b>	<b>\$820.29</b>
Kaiser Permanente Standard - Child	\$630.49	\$40.44	\$3.14	\$6.77	<b>\$674.07</b>	<b>\$677.70</b>
Kaiser Permanente Deductible - Child	\$581.06	\$40.44	\$3.14	\$6.77	<b>\$624.64</b>	<b>\$628.27</b>
<b>Most City Employees</b>	<b>Medical</b>	<b>DHS</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total with Vision Basic</b>	<b>Total with Vision Buy-Up</b>
Preventive - Domestic Partner	\$1,022.60	\$67.63	\$4.49	\$9.67	<b>\$1,094.72</b>	<b>\$1,099.90</b>
Traditional - Domestic Partner	\$934.02	\$67.63	\$4.49	\$9.67	<b>\$1,006.14</b>	<b>\$1,011.32</b>
Kaiser Permanente Standard - Domestic Partner	\$736.61	\$67.63	\$4.49	\$9.67	<b>\$808.73</b>	<b>\$813.91</b>
Kaiser Permanente Deductible - Domestic Partner	\$694.41	\$67.63	\$4.49	\$9.67	<b>\$766.53</b>	<b>\$771.71</b>
Preventive - Child	\$858.38	\$47.34	\$3.14	\$6.77	<b>\$908.86</b>	<b>\$912.49</b>
Traditional - Child	\$773.08	\$47.34	\$3.14	\$6.77	<b>\$823.56</b>	<b>\$827.19</b>
Kaiser Permanente Standard - Child	\$630.49	\$47.34	\$3.14	\$6.77	<b>\$680.97</b>	<b>\$684.60</b>
Kaiser Permanente Deductible - Child	\$581.06	\$47.34	\$3.14	\$6.77	<b>\$631.54</b>	<b>\$635.17</b>

**DOMESTIC PARTNER HEALTH INSURANCE  
2025 MONTHLY TAXABLE VALUES**

<b>Seattle Police Officers' Guild - LEOFF 2</b>	<b>Medical</b>	<b>Delta Dental of WA</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total</b>	
Preventive - Domestic Partner	\$1,205.53	\$66.30	\$13.68	NA	<b>\$1,285.51</b>	
Traditional - Domestic Partner	\$1,074.83	\$66.30	\$13.68	NA	<b>\$1,154.81</b>	
Kaiser Permanente Standard - Domestic Partner	\$872.68	\$66.30	\$13.68	NA	<b>\$952.66</b>	
Kaiser Permanente Deductible - Domestic Partner	\$646.89	\$66.30	\$13.68	NA	<b>\$726.87</b>	
Preventive - Child	\$1,071.32	\$46.41	\$9.57	NA	<b>\$1,127.30</b>	
Traditional - Child	\$955.17	\$46.41	\$9.57	NA	<b>\$1,011.15</b>	
Kaiser Permanente Standard - Child	\$775.52	\$46.41	\$9.57	NA	<b>\$831.50</b>	
Kaiser Permanente Deductible - Child	\$574.87	\$46.41	\$9.57	NA	<b>\$630.85</b>	
<b>Seattle Police Officers' Guild - LEOFF 2</b>	<b>Medical</b>	<b>DHS</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total</b>	
Preventive - Domestic Partner	\$1,205.53	\$73.72	\$13.68	NA	<b>\$1,292.93</b>	
Traditional - Domestic Partner	\$1,074.83	\$73.72	\$13.68	NA	<b>\$1,162.23</b>	
Kaiser Permanente Standard - Domestic Partner	\$872.68	\$73.72	\$13.68	NA	<b>\$960.08</b>	
Kaiser Permanente Deductible - Domestic Partner	\$646.89	\$73.72	\$13.68	NA	<b>\$734.29</b>	
Preventive - Child	\$1,071.32	\$51.61	\$9.57	NA	<b>\$1,132.50</b>	
Traditional - Child	\$955.17	\$51.61	\$9.57	NA	<b>\$1,016.35</b>	
Kaiser Permanente Standard - Child	\$775.52	\$51.61	\$9.57	NA	<b>\$836.70</b>	
Kaiser Permanente Deductible - Child	\$574.87	\$51.61	\$9.57	NA	<b>\$636.05</b>	

**DOMESTIC PARTNER HEALTH INSURANCE  
2025 MONTHLY TAXABLE VALUES**

<b>Local 77 - Core</b>	<b>Medical</b>	<b>Delta Dental of WA</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total</b>	
Preventive - Domestic Partner	\$1,076.86	\$59.79	\$5.63	NA	<b>\$1,142.28</b>	
Traditional - Domestic Partner	\$1,096.52	\$59.79	\$5.63	NA	<b>\$1,161.94</b>	
Kaiser Permanente Standard - Domestic Partner	\$716.41	\$59.79	\$5.63	NA	<b>\$781.83</b>	
Preventive - Child	\$1,076.26	\$41.86	\$3.94	NA	<b>\$1,122.06</b>	
Traditional - Child	\$1,095.92	\$41.86	\$3.94	NA	<b>\$1,141.72</b>	
Kaiser Permanente Standard - Child	\$716.02	\$41.86	\$3.94	NA	<b>\$761.82</b>	

<b>Local 77 - Core</b>	<b>Medical</b>	<b>DHS</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total</b>	
Preventive - Domestic Partner	\$1,076.86	\$73.72	\$5.63	NA	<b>\$1,156.21</b>	
Traditional - Domestic Partner	\$1,096.52	\$73.72	\$5.63	NA	<b>\$1,175.87</b>	
Kaiser Permanente Standard - Domestic Partner	\$716.41	\$73.72	\$5.63	NA	<b>\$795.76</b>	
Preventive - Child	\$1,076.26	\$51.61	\$3.94	NA	<b>\$1,131.81</b>	
Traditional - Child	\$1,095.92	\$51.61	\$3.94	NA	<b>\$1,151.47</b>	
Kaiser Permanente Standard - Child	\$716.02	\$51.61	\$3.94	NA	<b>\$771.57</b>	

<b>Local 77 - Most Plan Design</b>	<b>Medical</b>	<b>Delta Dental of WA</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total</b>	
Preventive - Domestic Partner	\$1,022.83	\$59.79	\$5.63	NA	<b>\$1,088.25</b>	
Traditional - Domestic Partner	\$1,049.62	\$59.79	\$5.63	NA	<b>\$1,115.04</b>	
Kaiser Permanente Standard - Domestic Partner	\$739.52	\$59.79	\$5.63	NA	<b>\$804.94</b>	
Preventive - Child	\$858.57	\$41.86	\$3.94	NA	<b>\$904.37</b>	
Traditional - Child	\$865.57	\$41.86	\$3.94	NA	<b>\$911.37</b>	
Kaiser Permanente Standard - Child	\$632.82	\$41.86	\$3.94	NA	<b>\$678.62</b>	

<b>Local 77 - Most Plan Design</b>	<b>Medical</b>	<b>DHS</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total</b>	
Preventive - Domestic Partner	\$1,022.83	\$73.72	\$5.63	NA	<b>\$1,102.18</b>	
Traditional - Domestic Partner	\$1,049.62	\$73.72	\$5.63	NA	<b>\$1,128.97</b>	
Kaiser Permanente Standard - Domestic Partner	\$739.52	\$73.72	\$5.63	NA	<b>\$818.87</b>	
Preventive - Child	\$858.57	\$51.61	\$3.94	NA	<b>\$914.12</b>	
Traditional - Child	\$865.57	\$51.61	\$3.94	NA	<b>\$921.12</b>	
Kaiser Permanente Standard - Child	\$632.82	\$51.61	\$3.94	NA	<b>\$688.37</b>	

**DOMESTIC PARTNER HEALTH INSURANCE  
2025 MONTHLY TAXABLE VALUES**

<b>Fire Chiefs (LEOFF 2)</b>	<b>Medical</b>	<b>Delta Dental of WA</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total with Vision Basic</b>	<b>Total with Vision Buy-Up</b>
Preventive - Domestic Partner	\$1,072.98	\$57.77	\$4.49	\$9.67	\$1,135.24	\$1,140.42
Traditional - Domestic Partner	\$773.52	\$57.77	\$4.50	\$9.67	\$835.79	\$840.96
Kaiser Permanente Standard - Domestic Partner	\$788.11	\$57.77	\$4.50	\$9.67	\$850.38	\$855.55
Kaiser Permanente Deductible - Domestic Partner	\$726.33	\$57.77	\$4.50	\$9.67	\$788.60	\$793.77
Preventive - Child	\$858.38	\$40.44	\$3.14	\$6.77	\$901.96	\$905.59
Traditional - Child	\$773.08	\$40.44	\$3.14	\$6.77	\$816.66	\$820.29
Kaiser Permanente Standard - Child	\$630.49	\$40.44	\$3.14	\$6.77	\$674.07	\$677.70
Kaiser Permanente Deductible - Child	\$581.06	\$40.44	\$3.14	\$6.77	\$624.64	\$628.27

<b>Fire Chiefs (LEOFF 2)</b>	<b>Medical</b>	<b>DHS</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total with Vision Basic</b>	<b>Total with Vision Buy-Up</b>
Preventive - Domestic Partner	\$1,072.98	\$67.63	\$4.49	\$9.67	\$1,145.10	\$1,150.28
Traditional - Domestic Partner	\$773.52	\$67.63	\$4.49	\$9.67	\$845.64	\$850.82
Kaiser Permanente Standard - Domestic Partner	\$788.11	\$67.63	\$4.49	\$9.67	\$860.23	\$865.41
Kaiser Permanente Deductible - Domestic Partner	\$726.33	\$67.63	\$4.49	\$9.67	\$798.45	\$803.63
Preventive - Child	\$858.38	\$47.34	\$3.14	\$6.77	\$908.86	\$912.49
Traditional - Child	\$773.08	\$47.34	\$3.14	\$6.77	\$823.56	\$827.19
Kaiser Permanente Standard - Child	\$630.49	\$47.34	\$3.14	\$6.77	\$680.97	\$684.60
Kaiser Permanente Deductible - Child	\$581.06	\$47.34	\$3.14	\$6.77	\$631.54	\$635.17

**DOMESTIC PARTNER HEALTH INSURANCE  
2025 MONTHLY TAXABLE VALUES**

<b>CMEO Local 77</b>	<b>Medical</b>	<b>Delta Dental of WA</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total with Vision Basic</b>	<b>Total with Vision Buy-Up</b>
Preventive - Domestic Partner	\$1,044.72	\$57.77	\$4.49	\$9.67	\$1,106.98	\$1,112.16
Traditional - Domestic Partner	\$952.02	\$57.77	\$4.49	\$9.67	\$1,014.28	\$1,019.46
Kaiser Permanente Standard - Domestic Partner	\$758.25	\$57.77	\$4.49	\$9.67	\$820.51	\$825.69
Kaiser Permanente Deductible - Domestic Partner	\$707.83	\$57.77	\$4.49	\$9.67	\$770.09	\$775.27
Preventive - Child	\$858.38	\$40.44	\$3.14	\$6.77	\$901.96	\$905.59
Traditional - Child	\$773.08	\$40.44	\$3.14	\$6.77	\$816.66	\$820.29
Kaiser Permanente Standard - Child	\$630.49	\$40.44	\$3.14	\$6.77	\$674.07	\$677.70
Kaiser Permanente Deductible - Child	\$581.06	\$40.44	\$3.14	\$6.77	\$624.64	\$628.27

<b>CMEO Local 77</b>	<b>Medical</b>	<b>DHS</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total with Vision Basic</b>	<b>Total with Vision Buy-Up</b>
Preventive - Domestic Partner	\$1,044.72	\$67.63	\$4.49	\$9.67	\$1,106.98	\$1,112.16
Traditional - Domestic Partner	\$952.02	\$67.63	\$4.49	\$9.67	\$1,014.28	\$1,019.46
Kaiser Permanente Standard - Domestic Partner	\$758.25	\$67.63	\$4.49	\$9.67	\$820.51	\$825.69
Kaiser Permanente Deductible - Domestic Partner	\$707.83	\$67.63	\$4.49	\$9.67	\$770.09	\$775.27
Preventive - Child	\$858.38	\$47.34	\$3.14	\$6.77	\$908.86	\$912.49
Traditional - Child	\$773.08	\$47.34	\$3.14	\$6.77	\$823.56	\$827.19
Kaiser Permanente Standard - Child	\$630.49	\$47.34	\$3.14	\$6.77	\$680.97	\$684.60
Kaiser Permanente Deductible - Child	\$581.06	\$47.34	\$3.14	\$6.77	\$631.54	\$635.17

Preventive - Domestic Partner	\$1,044.72	\$67.63	\$4.49	\$9.67	\$1,116.84	\$1,122.02
Traditional - Domestic Partner	\$952.02	\$67.63	\$4.49	\$9.67	\$1,024.14	\$1,029.32
Kaiser Permanente Standard - Domestic Partner	\$758.25	\$67.63	\$4.49	\$9.67	\$830.37	\$835.55
Kaiser Permanente Deductible - Domestic Partner	\$707.83	\$67.63	\$4.49	\$9.67	\$779.95	\$785.13
Preventive - Child	\$858.38	\$47.34	\$3.14	\$6.77	\$908.86	\$912.49
Traditional - Child	\$773.08	\$47.34	\$3.14	\$6.77	\$823.56	\$827.19
Kaiser Permanente Standard - Child	\$630.49	\$47.34	\$3.14	\$6.77	\$680.97	\$684.60
Kaiser Permanente Deductible - Child	\$581.06	\$47.34	\$3.14	\$6.77	\$631.54	\$635.17
<b>DOMESTIC PARTNER HEALTH INSURANCE 2025 MONTHLY TAXABLE VALUES</b>						
<b>SPMA Buy-up to SPOG</b>	<b>Medical</b>	<b>Delta Dental of WA</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total</b>	
Preventive - Domestic Partner	\$1,288.77	\$66.30	\$13.68	NA	\$1,368.75	
Traditional - Domestic Partner	\$1,161.63	\$66.30	\$13.68	NA	\$1,241.61	
Kaiser Permanente Standard - Domestic Partner	\$917.90	\$66.30	\$13.68	NA	\$997.88	
Kaiser Permanente Deductible - Domestic Partner	\$686.67	\$66.30	\$13.68	NA	\$766.65	
Preventive - Child	\$1,071.32	\$46.41	\$9.57	NA	\$1,127.30	
Traditional - Child	\$955.17	\$46.41	\$9.57	NA	\$1,011.15	
Kaiser Permanente Standard - Child	\$775.52	\$46.41	\$9.57	NA	\$831.50	
Kaiser Permanente Deductible - Child	\$574.87	\$46.41	\$9.57	NA	\$630.85	
<b>SPMA Buy-up to SPOG</b>	<b>Medical</b>	<b>DHS</b>	<b>Vision Basic</b>	<b>Vision Buy-Up</b>	<b>Total</b>	
Preventive - Domestic Partner	\$1,288.77	\$73.72	\$13.68	NA	\$1,376.17	
Traditional - Domestic Partner	\$1,161.63	\$73.72	\$13.68	NA	\$1,249.03	
Kaiser Permanente Standard - Domestic Partner	\$917.90	\$73.72	\$13.68	NA	\$1,005.30	
Kaiser Permanente Deductible - Domestic Partner	\$686.67	\$73.72	\$13.68	NA	\$774.07	
Preventive - Child	\$1,071.32	\$51.61	\$9.57	NA	\$1,132.50	
Traditional - Child	\$955.17	\$51.61	\$9.57	NA	\$1,016.35	
Kaiser Permanente Standard - Child	\$775.52	\$51.61	\$9.57	NA	\$836.70	
Kaiser Permanente Deductible - Child	\$574.87	\$51.61	\$9.57	NA	\$636.05	

## 2025 RATES

**ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE**  
 Securian Financial
**Monthly Premium: Fully paid by employee**

Employee Only Coverage: \$0.03 per \$1,000 of Benefit  
 Employee & Family Coverage: \$0.04 per \$1,000 of Benefit

**GROUP TERM LIFE INSURANCE**  
 Securian Financial
**Basic Coverage: Monthly Premium: \$0.075 per \$1,000 of benefit**

City Share: \$.030  
 Employee Deduction: \$0.045

**Supplemental Coverage: Monthly Premium per \$1,000 of coverage**

Age	Premium	Age	Premium
Under 25	\$0.024		
25 - 29	\$0.024	50 - 54	\$0.171
30 - 34	\$0.035	55 - 59	\$0.266
35 - 39	\$0.047	60 - 64	\$0.407
40 - 44	\$0.066	65+	\$0.708
45 - 49	\$0.112		

**Dependent Child Supplemental Life (one premium covers all children)**

Coverage Amount	Premium
\$2,000	\$0.36
\$5,000	\$0.90
\$10,000	\$1.80

**LONG-TERM DISABILITY INSURANCE**  
 The Hartford
**Non-Uniformed Employees Plan Monthly Premium:**

City-Paid Basic Coverage: .142% of first \$667 of insured earnings  
 Employee-Paid Optional Coverage: .384% of next \$9,333 of insured earnings

**EMPLOYEE ASSISTANCE PROGRAM**  
 ComPsych

**2025 cost per budgeted position: \$17.40**