

AETNA TRADITIONAL PLAN - 2023 RATES
Effective January 1 - December 31, 2023

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	TES Employee	COBRA Rate
Most Employee, Library, & SHA	\$1,721.52	\$1,721.52	\$1,721.52	\$1,755.95
City Share & RSR Contribution	\$1,721.52	\$1,689.18	\$0.00	\$0.00
Employee Deduction	\$0.00	\$32.34	\$1,721.52	\$1,755.95
LEOFF II (Non-Represented)	\$1,721.52	\$1,721.52	N/A	\$1,755.95
City Share & RSR Contribution	\$1,721.52	\$1,689.18		\$0.00
Employee Deduction	\$0.00	\$32.34		\$1,755.95
SPMA (LEOFF I)	\$1,398.82	\$1,398.82	N/A	\$1,426.80
City Share & RSR Contribution	\$1,398.82	\$1,366.48		\$0.00
Employee Deduction	\$0.00	\$32.34		\$1,426.80
SPMA (LEOFF II)	\$1,721.52	\$1,721.52	N/A	\$1,755.95
City Share & RSR Contribution	\$1,721.52	\$1,689.18		\$0.00
Employee Deduction	\$0.00	\$32.34		\$1,755.95
SPMA Buy Up to SPOG Plan (LEOFF II)	\$2,139.31	\$2,139.31	N/A	\$2,182.10
City Share & RSR Contribution	\$1,721.51	\$1,689.17		\$0.00
Employee Deduction	\$417.80	\$450.14		\$2,182.10
Local 77	\$2,440.43	\$2,440.43	N/A	\$2,489.24
City Share	\$2,196.39	\$2,196.39		\$0.00
Employee Deduction	\$244.04	\$244.04		\$2,489.24
Local 77 - Most Plan Design	\$1,927.48	\$1,927.48	N/A	\$1,966.03
City Share	\$1,927.48	\$1,895.14		\$0.00
Employee Deduction	\$0.00	\$32.34		\$1,966.03
CMEO / Material Controllers (080 & 079)	\$1,721.52	\$1,721.52	N/A	\$1,755.95
City Share	\$1,694.38	\$1,674.54		\$0.00
Employee Deduction	\$27.14	\$47.00		\$1,755.95
SPOG (LEOFF II)	\$2,139.31	\$2,139.31	N/A	\$2,182.10
City Share	\$2,032.33	\$2,032.33		\$0.00
Employee Deduction	\$106.98	\$106.98		\$2,182.10
Fire Chiefs (LEOFF II)	\$1,721.52	\$1,721.52	N/A	\$1,755.95
City Share	\$1,721.52	\$1,550.36		\$0.00
Employee Deduction	\$0.00	\$171.16		\$1,755.95

KAISER PERMANENTE STANDARD - 2023 RATES
Effective January 1 - December 31, 2023

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	TES Employee	COBRA Rate
Most Employee, Library, & SHA	\$1,285.43	\$1,285.43	\$1,258.44	\$1,311.14
City Share & RSR Contribution	\$1,237.03	\$1,185.53	\$0.00	\$0.00
Employee Deduction	\$48.40	\$99.90	\$1,258.44	\$1,311.14
SPMA (LEOFF I)	\$1,285.43	\$1,285.43	N/A	\$1,311.14
City Share & RSR Contribution	\$1,285.43	\$1,233.93		\$0.00
Employee Deduction	\$0.00	\$51.50		\$1,311.14
SPMA (LEOFF II)	\$1,285.43	\$1,285.43	N/A	\$1,311.14
City Share & RSR Contribution	\$1,237.03	\$1,185.53		\$0.00
Employee Deduction	\$48.40	\$99.90		\$1,311.14
SPMA Buy up to SPOG Plan (LEOFF II)	\$1,587.90	\$1,587.90	N/A	\$1,619.66
City Share & RSR Contribution	\$1,237.02	\$1,185.52		\$0.00
Employee Deduction	\$350.88	\$402.38		\$1,619.66
Local 77	\$1,459.81	\$1,459.81	N/A	\$1,489.01
City Share	\$1,313.83	\$1,313.83		\$0.00
Employee Deduction	\$145.98	\$145.98		\$1,489.01
Local 77 - Most Plan Design	\$1,290.17	\$1,290.17	N/A	\$1,315.97
City Share	\$1,241.77	\$1,190.27		\$0.00
Employee Deduction	\$48.40	\$99.90		\$1,315.97
CMEO / Material Controllers (080 & 079)	\$1,285.43	\$1,285.43		\$1,311.14
City Share	\$1,253.81	\$1,214.59		\$0.00
Employee Deduction	\$31.62	\$70.84		\$1,311.14
SPOG (LEOFF II)	\$1,587.90	\$1,587.90	N/A	\$1,619.66
City Share	\$1,508.50	\$1,508.50		\$0.00
Employee Deduction	\$79.40	\$79.40		\$1,619.66
Fire Chiefs (LEOFF II)	\$1,285.43	\$1,285.43	N/A	\$1,311.14
City Share	\$1,156.89	\$1,156.89		\$0.00
Employee Deduction	\$128.54	\$128.54		\$1,311.14

KAISER PERMANENTE DEDUCTIBLE - 2023 RATES**Effective January 1 - December 31, 2023**

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	TES Employee	COBRA Rate
Most Employee, Library, & SHA	\$1,184.65	\$1,184.65	\$1,184.66	\$1,208.34
City Share & RSR Contribution	\$1,159.65	\$1,127.73	\$0.00	\$0.00
Employee Deduction	\$25.00	\$56.92	\$1,184.66	\$1,208.34
LEOFF II (Non-Represented)	\$1,184.65	\$1,184.65	N/A	\$1,208.34
City Share & RSR Contribution	\$1,127.73	\$1,159.65		\$0.00
Employee Deduction	\$25.00	\$56.92		\$1,208.34
SPMA (LEOFF I)	\$1,184.65	\$1,184.65	N/A	\$1,208.34
City Share & RSR Contribution	\$1,184.65	\$1,152.73		\$0.00
Employee Deduction	\$0	\$31.92		\$1,208.34
SPMA (LEOFF II)	\$1,184.65	\$1,184.65	N/A	\$1,208.34
City Share & RSR Contribution	\$1,159.65	\$1,127.73		\$0.00
Employee Deduction	\$25.00	\$56.92		\$1,208.34
SPMA Buy up to SPOG Plan (LEOFF II)	\$1,177.05	\$1,177.05	N/A	\$1,200.59
City Share & RSR Contribution	\$1,159.65	\$1,127.73		\$0.00
Employee Deduction	\$17.40	\$49.32		\$1,200.59
Local 77	N/A	N/A	N/A	N/A
CMEO / Material Controllers (080 & 079)	\$1,184.65	\$1,184.65		\$1,208.34
City Share	\$1,170.41	\$1,146.11		\$0.00
Employee Deduction	\$14.24	\$38.54		\$1,208.34
SPOG (LEOFF II)	\$1,177.05	\$1,177.05	N/A	\$1,200.59
City Share	\$1,118.19	\$1,118.19		\$0.00
Employee Deduction	\$58.86	\$58.86		\$1,200.59
Fire Chiefs (LEOFF II)	\$1,184.65	\$1,184.65	N/A	\$1,208.34
City Share	\$1,066.17	\$1,066.17		\$0.00
Employee Deduction	\$118.48	\$118.48		\$1,208.34

AETNA PREVENTIVE PLAN 2023 RATES**Effective January 1 - December 31, 2023**

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	TES Employee	COBRA Rate
Most Employee, Library, & SHA	\$1,900.53	\$1,900.53	\$1,900.54	\$1,938.54
City Share & RSR Contribution	\$1,852.41	\$1,802.03	\$0.00	\$0.00
Employee Deduction	\$48.12	\$98.50	\$1,900.54	\$1,938.54
LEOFF II (Non-Represented)	\$1,900.53	\$1,900.53	N/A	\$1,938.54
City Share & RSR Contribution	\$1,852.41	\$1,802.03		\$0.00
Employee Deduction	\$48.12	\$98.50		\$1,938.54
SPMA (LEOFF II)	\$1,900.53	\$1,900.53	N/A	\$1,938.54
City Share & RSR Contribution	\$1,852.41	\$1,802.03		\$0.00
Employee Deduction	\$48.12	\$98.50		\$1,938.54
SPMA Buy up to SPOG Plan (LEOFF II)	\$2,399.45	\$2,399.45	N/A	\$2,447.44
City Share & RSR Contribution	\$1,852.41	\$1,802.03		\$0.00
Employee Deduction	\$547.04	\$597.42		\$2,447.44
Local 77	\$2,382.93	\$2,382.93	N/A	\$2,430.59
City Share	\$2,144.63	\$2,144.63		\$0.00
Employee Deduction	\$238.30	\$238.30		\$2,430.59
Local 77 - Most Plan Design	\$1,900.95	\$1,900.95	N/A	\$1,938.97
City Share	\$1,852.83	\$1,802.45		\$0.00
Employee Deduction	\$48.12	\$98.50		\$1,938.97
CMEO / Material Controllers (080 & 079)	\$1,900.53	\$1,900.53	N/A	\$1,938.54
City Share	\$1,841.95	\$1,807.77		\$0.00
Employee Deduction	\$58.58	\$92.76		\$1,938.54
SPOG (LEOFF II)	\$2,399.45	\$2,399.45	N/A	\$2,447.44
City Share	\$2,279.47	\$2,279.47		\$0.00
Employee Deduction	\$119.98	\$119.98		\$2,447.44
Fire Chiefs (LEOFF II)	\$1,900.53	\$1,900.53	N/A	\$1,938.54
City Share	\$1,710.47	\$1,710.47		\$0.00
Employee Deduction	\$190.06	\$190.06		\$1,938.54

DELTA DENTAL OF WA 2023 RATES				
Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	TES Employee	COBRA Rate
Most Employee, Library, & SHA	\$120.66	\$120.66	\$120.66	\$123.07
City Share	\$120.66	\$120.66	\$0.00	\$0.00
Employee Deduction	\$0.00	\$0.00	\$120.66	\$123.07
LEOFF II (Non-Represented)	\$120.66	\$120.66	N/A	\$123.07
City Share	\$120.66	\$120.66		\$0.00
Employee Deduction	\$0.00	\$0.00		\$123.07
SPMA (LEOFF I & II)	\$120.66	\$120.66	N/A	\$123.07
City Share	\$120.66	\$120.66		\$0.00
Employee Deduction	\$0.00	\$0.00		\$123.07
SPMA Buy up to SPOG Plan (LEOFF I & II)	\$138.87	\$138.87	N/A	\$141.65
City Share & RSR Contribution	\$120.65	\$120.65		\$0.00
Employee Deduction	\$18.22	\$18.22		\$141.65
Local 77	\$124.88	\$124.88	N/A	\$127.38
City Share	\$124.88	\$124.88		\$0.00
Employee Deduction	\$0.00	\$0.00		\$127.38
CMEO / Material Controllers (080 & 079)	\$119.72	\$119.72	N/A	\$122.11
City Share	\$119.72	\$119.72		\$0.00
Employee Deduction	\$0.00	\$0.00		\$122.11
SPOG (LEOFF II)	\$138.87	\$138.87	N/A	\$141.65
City Share	\$138.87	\$138.87		\$0.00
Employee Deduction	\$0.00	\$0.00		\$141.65
Fire Chiefs (LEOFF II)	\$120.66	\$120.66	N/A	\$123.07
City Share	\$105.21	\$105.21		\$0.00
Employee Deduction	\$12.06	\$12.06		\$123.07

DENTAL HEALTH SERVICES 2023 RATES

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	TES Employee	COBRA Rate
Most Employee, Library, & SHA	\$142.65	\$142.65	\$142.66	\$145.50
City Share	\$142.65	\$142.65	\$0.00	\$0.00
Employee Deduction	\$0.00	\$0.00	\$142.66	\$145.50
LEOFF II (Non-Represented)	\$142.65	\$142.65	N/A	\$145.50
City Share	\$142.65	\$142.65		\$0.00
Employee Deduction	\$0.00	\$0.00		\$145.50
SPMA (LEOFF I & II)	\$142.65	\$142.65	N/A	\$145.50
City Share	\$142.65	\$142.65		\$0.00
Employee Deduction	\$0.00	\$0.00		\$145.50
SPMA Buy up to SPOG Plan (LEOFF I & II)	\$152.00	\$152.00	N/A	\$155.04
City Share & RSR Contribution	\$142.64	\$142.64		\$0.00
Employee Deduction	\$9.36	\$9.36		\$155.04
Local 77	\$152.00	\$152.00	N/A	\$155.04
City Share	\$152.00	\$152.00		\$0.00
Employee Deduction	\$0.00	\$0.00		\$155.04
CMEO / Material Controllers (080 & 079)	\$142.65	\$142.65	N/A	\$145.50
City Share	\$142.65	\$142.65		\$0.00
Employee Deduction	\$0.00	\$0.00		\$145.50
SPOG (LEOFF II)	\$152.00	\$152.00	N/A	\$155.04
City Share	\$152.00	\$152.00		\$0.00
Employee Deduction	\$0.00	\$0.00		\$155.04
Fire Chiefs (LEOFF II)	\$142.65	\$147.45	N/A	\$145.50
City Share	\$128.37	\$133.17		\$0.00
Employee Deduction	\$14.28	\$14.28		\$145.50

VISION SERVICE BASIC PLAN 2023 RATES

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	TES Employee	COBRA Rate
Most Employee, Library, & SHA	\$9.47	\$9.47	\$9.48	\$9.66
City Share	\$9.47	\$9.47	\$0.00	\$0.00
Employee Deduction	\$0.00	\$0.00	\$9.48	\$9.66
LEOFF II (Non-Represented)	\$9.47	\$9.47	N/A	\$9.66
City Share	\$9.47	\$9.47		\$0.00
Employee Deduction	\$0.00	\$0.00		\$9.66
SPMA (LEOFF I & II)	\$9.47	\$9.47	N/A	\$9.66
City Share	\$9.47	\$9.47		\$0.00
Employee Deduction	\$0.00	\$0.00		\$9.66
SPMA Buy up to SPOG Plan	\$28.85	\$28.85		\$29.43
City Share & RSR Contribution	\$9.47	\$9.47	N/A	\$0.00
Employee Deduction	\$19.38	\$19.38		\$29.43
Local 77	\$11.87	\$11.87	N/A	\$12.11
City Share	\$11.87	\$11.87		\$0.00
Employee Deduction	\$0.00	\$0.00		\$12.11
CMEO / Material Controllers (080 & 079)	\$9.47	\$9.47		\$9.66
City Share	\$9.47	\$9.47	N/A	\$0.00
Employee Deduction	\$0.00	\$0.00		\$9.66
SPOG (LEOFF II)	\$28.85	\$28.85	N/A	\$29.43
City Share	\$28.85	\$28.85		\$0.00
Employee Deduction	\$0.00	\$0.00		\$29.43
Fire Chiefs (LEOFF II)	\$9.47	\$9.47	N/A	\$9.66
City Share	\$8.53	\$8.53		\$0.00
Employee Deduction	\$0.94	\$0.94		\$9.66

VISION SERVICE BUY UP PLAN 2023 RATES

Employee Group	Single Employee with or without Children	Employee with Spouse/Domestic Partner with or without Children	TES Employee	COBRA Rate
Most Employee, Library, & SHA	\$19.85	\$19.85	\$19.86	\$20.25
City Share	\$9.47	\$9.47		\$0.00
Employee Deduction	\$10.38	\$10.38	\$19.86	\$20.25
LEOFF II (Non-Represented)	\$19.85	\$19.85	N/A	\$20.25
City Share	\$9.47	\$9.47		\$0.00
Employee Deduction	\$10.38	\$10.38		\$20.25
SPMA (LEOFF I & II)	\$19.85	\$19.85	N/A	\$20.25
City Share	\$9.47	\$9.47		\$0.00
Employee Deduction	\$10.38	\$10.38		\$20.25
Local 77	N/A	N/A	N/A	N/A
City Share				
Employee Deduction				
CMEO / Material Controllers (080 & 079)	\$19.85	\$19.85		\$20.25
City Share	\$9.47	\$9.47	N/A	\$0.00
Employee Deduction	\$10.38	\$10.38		\$20.25
SPOG (LEOFF II)	N/A	N/A	N/A	N/A
City Share				
Employee Deduction				
Fire Chiefs (LEOFF II)	\$19.85	\$19.85	N/A	\$20.25
City Share	\$9.47	\$9.47		\$0.00
Employee Deduction	\$10.38	\$10.38		\$20.25

**DOMESTIC PARTNER HEALTH INSURANCE
2023 MONTHLY TAXABLE VALUES**

Most City Employees	Medical	Delta Dental of WA	Vision Basic	Vision Buy-Up	Total with Vision Basic	Total with Vision Buy-Up
Preventive - Domestic Partner	\$893.14	\$56.72	\$4.45	\$9.33	\$954.31	\$959.19
Traditional - Domestic Partner	\$822.31	\$56.72	\$4.45	\$9.33	\$883.48	\$888.36
Kaiser Permanente Standard - Domestic Partner	\$586.66	\$56.72	\$4.45	\$9.33	\$647.83	\$652.71
Kaiser Permanente Deductible - Domestic Partner	\$556.20	\$56.72	\$4.45	\$9.33	\$617.37	\$622.25
Preventive - Child	\$754.82	\$46.94	\$3.12	\$6.53	\$804.88	\$808.29
Traditional - Child	\$683.72	\$46.94	\$3.12	\$6.53	\$733.78	\$737.19
Kaiser Permanente Standard - Child	\$510.52	\$46.94	\$3.12	\$6.53	\$560.58	\$563.99
Kaiser Permanente Deductible - Child	\$470.50	\$46.94	\$3.12	\$6.53	\$520.56	\$523.97
Most City Employees	Medical	DHS	Vision Basic	Vision Buy-Up	Total with Vision Basic	Total with Vision Buy-Up
Preventive - Domestic Partner	\$893.14	\$67.06	\$4.45	\$9.33	\$964.65	\$969.53
Traditional - Domestic Partner	\$822.31	\$67.06	\$4.45	\$9.33	\$893.82	\$898.70
Kaiser Permanente Standard - Domestic Partner	\$586.66	\$67.06	\$4.45	\$9.33	\$658.17	\$663.05
Kaiser Permanente Deductible - Domestic Partner	\$556.20	\$67.06	\$4.45	\$9.33	\$627.71	\$632.59
Preventive - Child	\$754.82	\$46.94	\$3.12	\$6.53	\$804.88	\$808.29
Traditional - Child	\$683.72	\$46.94	\$3.12	\$6.53	\$733.78	\$737.19
Kaiser Permanente Standard - Child	\$510.52	\$46.94	\$3.12	\$6.53	\$560.58	\$563.99
Kaiser Permanente Deductible - Child	\$470.50	\$46.94	\$3.12	\$6.53	\$520.56	\$523.97

**DOMESTIC PARTNER HEALTH INSURANCE
2023 MONTHLY TAXABLE VALUES**

Seattle Police Officers' Guild - LEOFF 2	Medical	Delta Dental of WA	Vision Basic	Vision Buy-Up	Total	
Preventive - Domestic Partner	\$1,071.23	\$65.28	\$13.56	NA	\$1,150.07	
Traditional - Domestic Partner	\$955.09	\$65.28	\$13.56	NA	\$1,033.93	
Kaiser Permanente Standard - Domestic Partner	\$708.92	\$65.28	\$13.56	NA	\$787.76	
Kaiser Permanente Deductible - Domestic Partner	\$489.49	\$65.28	\$13.56	NA	\$568.33	
Preventive - Child	\$952.97	\$45.70	\$9.49	NA	\$1,008.16	
Traditional - Child	\$849.65	\$45.70	\$9.49	NA	\$904.84	
Kaiser Permanente Standard - Child	\$630.65	\$45.70	\$9.49	NA	\$685.84	
Kaiser Permanente Deductible - Child	\$467.48	\$45.70	\$9.49	NA	\$522.67	
Seattle Police Officers' Guild - LEOFF 2	Medical	DHS	Vision Basic	Vision Buy-Up	Total	
Preventive - Domestic Partner	\$1,071.23	\$71.45	\$13.56	NA	\$1,156.24	
Traditional - Domestic Partner	\$955.09	\$71.45	\$13.56	NA	\$1,040.10	
Kaiser Permanente Standard - Domestic Partner	\$708.92	\$71.45	\$13.56	NA	\$793.93	
Kaiser Permanente Deductible - Domestic Partner	\$489.49	\$71.45	\$13.56	NA	\$574.50	
Preventive - Child	\$952.97	\$50.02	\$9.49	NA	\$1,012.48	
Traditional - Child	\$849.65	\$50.02	\$9.49	NA	\$909.16	
Kaiser Permanente Standard - Child	\$630.65	\$50.02	\$9.49	NA	\$690.16	
Kaiser Permanente Deductible - Child	\$467.48	\$50.02	\$9.49	NA	\$526.99	

**DOMESTIC PARTNER HEALTH INSURANCE
2023 MONTHLY TAXABLE VALUES**

Local 77 - Core	Medical	Delta Dental of WA	Vision Basic	Vision Buy-Up	Total	
Preventive - Domestic Partner	\$944.71	\$58.70	\$5.58	NA	\$1,008.99	
Traditional - Domestic Partner	\$967.52	\$58.70	\$5.58	NA	\$1,031.80	
Kaiser Permanente Standard - Domestic Partner	\$578.75	\$58.70	\$5.58	NA	\$643.03	
Preventive - Child	\$946.41	\$41.09	\$3.91	NA	\$991.41	
Traditional - Child	\$969.25	\$41.09	\$3.91	NA	\$1,014.25	
Kaiser Permanente Standard - Child	\$579.78	\$41.09	\$3.91	NA	\$624.78	
Local 77 - Core	Medical	DHS	Vision Basic	Vision Buy-Up	Total	
Preventive - Domestic Partner	\$944.71	\$71.45	\$5.58	NA	\$1,021.74	
Traditional - Domestic Partner	\$967.52	\$71.45	\$5.58	NA	\$1,044.55	
Kaiser Permanente Standard - Domestic Partner	\$578.75	\$71.45	\$5.58	NA	\$655.78	
Preventive - Child	\$946.41	\$50.02	\$3.91	NA	\$1,000.34	
Traditional - Child	\$969.25	\$50.02	\$3.91	NA	\$1,023.18	
Kaiser Permanente Standard - Child	\$579.78	\$50.02	\$3.91	NA	\$633.71	

Local 77 - Most Plan Design	Medical	Delta Dental of WA	Vision Basic	Vision Buy-Up	Total	
Preventive - Domestic Partner	\$893.35	\$58.70	\$5.58	NA	\$957.63	
Traditional - Domestic Partner	\$924.56	\$58.70	\$5.58	NA	\$988.84	
Kaiser Permanente Standard - Domestic Partner	\$589.01	\$58.70	\$5.58	NA	\$653.29	
Preventive - Child	\$754.99	\$41.09	\$3.91	NA	\$799.99	
Traditional - Child	\$765.62	\$41.09	\$3.91	NA	\$810.62	
Kaiser Permanente Standard - Child	\$512.41	\$41.09	\$3.91	NA	\$557.41	
Local 77 - Most Plan Design	Medical	DHS	Vision Basic	Vision Buy-Up	Total	
Preventive - Domestic Partner	\$893.35	\$71.45	\$5.58	NA	\$970.38	
Traditional - Domestic Partner	\$924.56	\$71.45	\$5.58	NA	\$1,001.59	
Kaiser Permanente Standard - Domestic Partner	\$589.01	\$71.45	\$5.58	NA	\$666.04	
Preventive - Child	\$754.99	\$50.02	\$3.91	NA	\$808.92	
Traditional - Child	\$765.62	\$50.02	\$3.91	NA	\$819.55	
Kaiser Permanente Standard - Child	\$512.41	\$50.02	\$3.91	NA	\$566.34	

**DOMESTIC PARTNER HEALTH INSURANCE
2023 MONTHLY TAXABLE VALUES**

Fire Chiefs (LEOFF 2)	Medical	Delta Dental of WA	Vision Basic	Vision Buy-Up	Total with Vision Basic	Total with Vision Buy-Up
Preventive - Domestic Partner	\$943.52	\$56.72	\$4.45	\$9.33	\$1,004.69	\$1,009.57
Traditional - Domestic Partner	\$683.49	\$56.72	\$4.45	\$9.33	\$744.66	\$749.54
Kaiser Permanente Standard - Domestic Partner	\$638.16	\$56.72	\$4.45	\$9.33	\$699.33	\$704.21
Kaiser Permanente Deductible - Domestic Partner	\$588.12	\$56.72	\$4.45	\$9.33	\$649.29	\$654.17
Preventive - Child	\$754.82	\$46.94	\$3.12	\$6.53	\$804.88	\$808.29
Traditional - Child	\$683.72	\$46.94	\$3.12	\$6.53	\$733.78	\$737.19
Kaiser Permanente Standard - Child	\$510.52	\$46.94	\$3.12	\$6.53	\$560.58	\$563.99
Kaiser Permanente Deductible - Child	\$470.50	\$46.94	\$3.12	\$6.53	\$520.56	\$523.97
Fire Chiefs (LEOFF 2)	Medical	DHS	Vision Basic	Vision Buy-Up	Total with Vision Basic	Total with Vision Buy-Up
Preventive - Domestic Partner	\$943.52	\$67.06	\$4.45	\$9.33	\$1,015.03	\$1,019.91
Traditional - Domestic Partner	\$683.49	\$67.06	\$4.45	\$9.33	\$755.00	\$759.88
Kaiser Permanente Standard - Domestic Partner	\$638.16	\$67.06	\$4.45	\$9.33	\$709.67	\$714.55
Kaiser Permanente Deductible - Domestic Partner	\$588.12	\$67.06	\$4.45	\$9.33	\$659.63	\$664.51
Preventive - Child	\$754.82	\$46.94	\$3.12	\$6.53	\$804.88	\$808.29
Traditional - Child	\$683.72	\$46.94	\$3.12	\$6.53	\$733.78	\$737.19
Kaiser Permanente Standard - Child	\$510.52	\$46.94	\$3.12	\$6.53	\$560.58	\$563.99
Kaiser Permanente Deductible - Child	\$470.50	\$46.94	\$3.12	\$6.53	\$520.56	\$523.97

2023 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:	\$0.030	
		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 \$7,666 of insured earnings		
EMPLOYEE ASSISTANCE PROGRAM				
Resources for Living				
2023 cost per budgeted position:		\$23.04		