

**2019 CITY OF EDMONDS
SUMMARY OF BENEFITS -LAW SUPPORT EMPLOYEES**

HEALTH INSURANCE:	AWC Regence Healthfirst 250 Plan or Kaiser Permanente 200 Plan, Family Coverage Available. Premium cost paid for: Employee 100% Dependents 90% Family of four - cost to Employee is \$120.77 - \$142.39**								
DENTAL INSURANCE:	Delta Dental Plan - Family Coverage Available (\$1500 annual limit) Reverse Incentive (100% - 70%) Includes \$1000 Orthodontia Rider Family of four - Employee Cost is \$12.80**								
VISION INSURANCE:	VSP Plan Family coverage - \$10 deductible Family of four - Employee cost is \$1.08**								
LIFE INSURANCE:	Basic Term Life - \$10,000 on Employee's life \$1,000 on spouse and dependents Premium is fully paid by the City. Voluntary buy-up available. \$150,000 - for duty related death - WA State								
RETIREMENT:	Mandatory State Retirement - PERS* Contribution Rates: <table border="0" style="margin-left: 20px;"> <thead> <tr> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>Employee</u></th> </tr> </thead> <tbody> <tr> <td>PERS II 12.70%</td> <td>7.38% (7/1/17)</td> </tr> <tr> <td>PERS II 12.83%</td> <td>7.41% (9/1/18)</td> </tr> <tr> <td>PERS II 12.86%</td> <td>7.90% (7/1/19)</td> </tr> </tbody> </table>	<u>City</u>	<u>Employee</u>	PERS II 12.70%	7.38% (7/1/17)	PERS II 12.83%	7.41% (9/1/18)	PERS II 12.86%	7.90% (7/1/19)
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MEBT:	Retirement program in lieu of Social Security Contribution Rate: City and Employee approximately 6.2% each Includes Long Term Disability & \$100,000 life insurance (employee paid)								
MEDICARE:	Employees hired after 4/86 pay 1.45%								
UNION DUES:	\$33.25 each pay period [2x per month]								
VACATION:	See Union Contract								
SICK LEAVE:	Earned at the rate of one day per month of service								
HOLIDAYS:	Effective 1/1/06, Holiday Bank of time - 110 hours (10 days) (88 hours are eligible for employer re-purchase)								
457 PLAN:	Employee only contribution - State Plan (DRS), Nationwide, & ICMA								
SUPPLEMENTAL INSURANCE:	AFLAC offers employee paid short term disability insurance, cancer insurance, accident insurance and others. Cigna offers additional, employee paid supplemental life insurance.								
EAP BENEFITS:	Employee Assistance Programs offered through AWC and Cigna.								
OTHER BENEFITS	Please see union contract for additional benefits and premiums.								

****See reverse side for cost breakdown**

**2019 HEALTH INSURANCE PREMIUM RATES - MONTHLY
POLICE OFFICERS AND LAW SUPPORT**

Employees covered at 100% and Dependents covered at 90%/10%

REGENCE HEALTHFIRST (AWC)	TOTAL	CITY PAYS	EMPLOYEE PAYS
GENERAL EMPLOYEE	743.23	743.23	0.00
Spouse	749.46	674.51	74.95
First Child	369.21	332.29	36.92
Second Child	305.23	274.71	30.52

KAISER PERMANENTE 200 (AWC)	TOTAL	CITY PAYS	EMPLOYEE PAYS
GENERAL EMPLOYEE	607.80	607.80	0.00
Spouse	597.66	537.89	59.77
First Child	304.98	274.48	30.50
Second Child	304.98	274.48	30.50

DENTAL BENEFITS	TOTAL	CITY PAYS	EMPLOYEE PAYS
PLAN - F Plus ORTHODONTIA III			
GENERAL EMPLOYEE	56.02	56.02	0.00
EMPLOYEE + 1	106.68	101.61	5.07
EMPLOYEE + 2 or more	183.99	171.19	12.80

VISION BENEFITS	TOTAL	CITY PAYS	EMPLOYEE PAYS
\$10.00 Deductible			
GENERAL EMPLOYEE	9.54	9.54	0.00
EMPLOYEE + 1	19.06	18.65	0.41
EMPLOYEE + 2 or more	28.58	27.50	1.08

***note that amounts deducted from paychecks may differ slightly due to system rounding.*