



2022 Benefit Cost Worksheet

General Services

Contributions for dependent coverage shall be shared with the City paying 85% of the premium and the employee paying the remaining 15% of the premium by payroll deduction irrespective of plans selected and tiers of coverage.

You do have the ability to OPT OUT of medical and/or dental.

<u>OPTIONS</u>	Employee	Employee	Emp+Child	Emp+Child	Emp+Children	Emp+Children	Emp+Spouse	Emp+Spouse	Emp+Family	Emp+Family
MEDICAL	Coverage	Cost Share	Coverage	Cost Share	Coverage	Cost Share	Coverage	Cost Share	Coverage	Cost Share
Regence	705.71	\$ 105.86	\$ 1,309.99	\$ 196.50	\$ 1,749.63	\$ 262.44	\$ 1,497.23	\$ 224.58	\$ 2,018.06	\$ 302.71
Kaiser	692.81	\$ 103.92	\$ 1,270.27	\$ 190.54	\$ 1,713.17	\$ 256.98	\$ 1,451.22	\$ 217.68	\$ 1,975.64	\$ 296.35
DENTAL										
Delta	50.38	\$ 7.56	\$ 77.67	\$ 11.65	\$ 145.51	\$ 21.83	\$ 88.78	\$ 13.32	\$ 167.84	\$ 25.18
Kaiser	82.58	\$ 12.39	\$ 127.30	\$ 19.10	\$ 240.31	\$ 36.05	\$ 145.48	\$ 21.82	\$ 277.15	\$ 41.57
Willamette	55.31	\$ 8.30	\$ 84.53	\$ 12.68	\$ 147.48	\$ 22.12	\$ 96.62	\$ 14.49	\$ 170.10	\$ 25.52

Enter your Cost Share medical premium election here:

\$ _____

Enter your Cost Share Dental premium election here:

\$ _____

Add the two lines together. This is your monthly pre-tax premium

\$