

**2025**

**AWC EMPLOYEE BENEFIT TRUST HEALTH INSURANCE**

**Non-Represented**

2025 Regence Health First 250 (80/20 Split)	100% Premium (7.3% Increase)	Rate w/ 2% Wellness Discount	City Share (monthly)	Employee Share (monthly)
Employee	974.10	954.62	763.70	190.92
Emp + Spouse	1,956.34	1,917.22	1533.78	383.44
Emp, Spouse + 1 child	2,440.20	2,391.40	1913.12	478.28
Emp, Spouse + 2 Children (full family)	2,840.24	2,783.44	2226.75	556.69
Emp + 1 child	1,457.96	1,428.82	1143.06	285.76
Emp + 2 children	1,858.00	1,820.84	1456.67	364.17

2025 Regence HDHP (Deductibles: 1500/3000)	100% Premium (7.3% Increase)	Rate w/ 2% Wellness Discount	City Share (monthly)	Employee Share (monthly)	City HSA Contribution (monthly)
Employee	677.36	663.82	663.82	-	75.00
Emp + Spouse	1,363.06	1,335.80	1335.80	-	93.58
Emp, Spouse + 1 child	1,706.88	1,672.76	1672.76	-	117.75
Emp, Spouse + 2 Children (full family)	1,988.42	1,948.66	1948.66	-	172.45
Emp + 1 child	1021.20	1000.78	1000.78	-	76.20
Emp + 2 children	1,302.72	1,276.68	1276.68	-	130.89
<i>No additional Charge for 3+ children</i>					

2025 Kaiser Permanente \$20 Copay / 200 Deductible (90/10 Split)	100% Premium (8.2% increase)	Rate w/ 2% Wellness Discount	City Share (monthly)	Employee Share (monthly)
Employee	870.58	853.18	767.86	85.32
Emp + Spouse	1,726.70	1,692.18	1522.96	169.22
Emp, Spouse + 1 child	2,163.54	2,120.28	1908.25	212.03
Emp, Spouse + 2 Children (full family)	2,600.40	2,548.40	2293.56	254.84
Emp + 1 child	1,307.44	1,281.30	1153.17	128.13
Emp + 2 children	1,744.28	1,709.40	1538.46	170.94
<i>No additional Charge for 3+ children</i>				

<b>(City pays all)</b>				
DENTAL / PLAN F	100% Premium (no increase)		City Share (monthly)	Employee Share
Employee	55.88		55.88	0.00
Emp + 1	105.68		105.68	0.00
Emp + 2	165.42		165.42	0.00

VSP (City pays all) \$25 co-pay with second pair rider	100% Premium (no Increase)		City Paid (monthly)
Employee	8.78		8.78
Emp + 1	17.56		17.56
Emp + 2	26.34		26.34

Long Term Disability- 67% Benefit	.516% of Base Pay	(no Increase)
Life Insurance and AD&D- 26,000.00 Benefit	3.90	

EAP	1 - 8 Sessions
Full Family	\$.14 - Employer Paid