

**2024 Benefit Plans for Lewis County AFSCME Employees**

**PEBB Full Benefits Packages**

**Includes medical, dental, vision, life, AD&D and long-term disability benefits**

**Employee Monthly Deductions**

Plan Name	Employee Only	Employee & Spouse	Employee & Children	Full family
<b>Kaiser Permanente WA Classic</b> <b>\$175 individual/\$525 family</b>				
Total Premium	1,096.70	2,036.30	1,801.40	2,741.00
Employer Paid	956.96	1,415.00	1,415.00	1,715.00
Employee Paid	139.74	621.30	386.40	1,026.00
<b>Kaiser Permanente WA Value</b> <b>\$250 individual/\$750 family</b>				
Total Premium	1,082.51	2,007.91	1,776.56	2,701.97
Employer Paid	942.04	1,415.00	1,409.67	1,715.00
Employee Paid	140.47	592.91	366.89	986.97
<b>Kaiser Permanente WA CDHP</b> <b>\$1600 individual/\$3200 family (with health savings account)</b>				
Total Premium	902.12	1,645.77	1,474.44	2,159.77
Employer Paid	889.62	1,415.00	1,394.83	1,715.00
Employee Paid	12.50	230.77	79.61	444.77
<b>Uniform Medical Plan Classic</b> <b>\$250 individual/\$750 family</b>				
Total Premium	994.82	1,832.54	1,623.11	2,460.83
Employer Paid	946.07	1,415.00	1,415.00	1,715.00
Employee Paid	48.75	417.54	208.11	745.83
<b>Uniform Medical Plan CDHP</b> <b>\$1600 individual/\$3200 family (with health savings account)</b>				
Total Premium	910.93	1,663.40	1,489.87	2,184.01
Employer Paid	894.16	1,413.09	1,392.13	1,715.00
Employee Paid	16.77	250.31	97.74	469.01
<b>Uniform Medical Plan Select</b> <b>\$750 individual/\$2,250 family</b>				
Total Premium	929.75	1,702.41	1,509.24	2,281.90
Employer Paid	903.89	1,415.00	1,394.93	1,715.00
Employee Paid	25.86	287.41	114.31	566.90

Employees waiving medical will remain enrolled in dental, life, AD&D, and LTD

Vision benefits vary based on medical plan chosen (medical & vision are bundled)

Basic Life and AD&D Insurance for Employees included in each plan:

Life Insurance	\$35,000
AD&D Insurance	\$5,000

Dental Insurance Options:

- Uniform Dental Plan (*preferred-provider plan*)
- DeltaCare (*managed-care plan*)
- Willamette Dental (*managed-care plan*)

Long term disability benefit included in each plan:

Basic LTD Plan	\$240 max/monthly
Employee LTD Buy-Up 60%, 50%, or decline	

Please see the PEBB employee information page regarding possible monthly surcharges (tobacco use & spousal coverage surcharge)