



Physicians & Dentists
Full Time Employee Premium Cost Shares
 January 1, 2019 - December 31, 2019



| Coverage Level | Total Monthly Premium | Refund to Employee | County Contribution | Employee Monthly Costs | Per Paycheck Deduction |
|---|-----------------------|--------------------|---------------------|------------------------|------------------------|
| Moda Platinum PPO Medical/Rx/Vision Plan | | | | | |
| Single | \$773.50 | N/A | \$715.50 | \$58.00 | \$29.00 |
| Two-Party | \$1,546.96 | N/A | \$1,430.94 | \$116.02 | \$58.01 |
| Family | \$2,203.34 | N/A | \$2,038.08 | \$165.26 | \$82.63 |
| Moda Major Medical and Rx Plan | | | | | |
| Single | \$370.98 | \$50.00 | \$420.98 | \$0.00 | \$0.00 |
| Two-Party | \$741.94 | \$50.00 | \$791.94 | \$0.00 | \$0.00 |
| Family | \$1,057.24 | \$50.00 | \$1,107.24 | \$0.00 | \$0.00 |
| Kaiser Medical/Rx/Vision Plan | | | | | |
| Single | \$712.92 | N/A | \$677.28 | \$35.64 | \$17.82 |
| Two-Party | \$1,424.18 | N/A | \$1,352.98 | \$71.20 | \$35.60 |
| Family | \$2,029.88 | N/A | \$1,928.38 | \$101.50 | \$50.75 |
| Delta Dental Plan | | | | | |
| Single | \$54.84 | N/A | \$52.10 | \$2.74 | \$1.37 |
| Two-Party | \$109.64 | N/A | \$104.16 | \$5.48 | \$2.74 |
| Family | \$156.02 | N/A | \$148.22 | \$7.80 | \$3.90 |
| Kaiser Dental Plan | | | | | |
| Single | \$87.52 | N/A | \$83.14 | \$4.38 | \$2.19 |
| Two-Party) | \$175.08 | N/A | \$166.32 | \$8.76 | \$4.38 |
| Family | \$249.48 | N/A | \$237.00 | \$12.48 | \$6.24 |
| Willamette Dental Plan | | | | | |
| Single | \$61.70 | N/A | \$58.62 | \$3.08 | \$1.54 |
| Two-Party) | \$123.40 | N/A | \$117.22 | \$6.18 | \$3.09 |
| Family | \$175.90 | N/A | \$167.10 | \$8.80 | \$4.40 |

Adding Domestic Partners and their Children: Imputed Income Tax

Employees who enroll family members who do not qualify as a Qualified Relative under the IRS code are required to pay tax on the value of that dependent's health plan coverage.



Physicians & Dentists
Part Time Employee Premium Cost Shares
 January 1, 2019 - December 31, 2019



| Coverage Level | Total Monthly Premium | Refund to Employee | County Contribution | Employee Monthly Costs | Per Paycheck Deduction |
|---|-----------------------|--------------------|---------------------|------------------------|------------------------|
| Moda Platinum PPO Medical/Rx/Vision Plan | | | | | |
| Single | \$773.50 | N/A | \$386.76 | \$386.74 | \$193.37 |
| Two-Party | \$1,546.96 | N/A | \$773.48 | \$773.48 | \$386.74 |
| Family | \$2,203.34 | N/A | \$1,101.66 | \$1,101.68 | \$550.84 |
| Moda Major Medical and Rx Plan | | | | | |
| Single | \$370.98 | \$0.00 | \$370.98 | \$0.00 | \$0.00 |
| Two-Party | \$741.94 | \$0.00 | \$741.94 | \$0.00 | \$0.00 |
| Family | \$1,057.24 | \$0.00 | \$1,057.24 | \$0.00 | \$0.00 |
| Kaiser Medical/Rx/Vision Plan | | | | | |
| Single | \$712.92 | N/A | \$442.02 | \$270.90 | \$135.45 |
| Two-Party | \$1,424.18 | N/A | \$883.00 | \$541.18 | \$270.59 |
| Family | \$2,029.88 | N/A | \$1,258.52 | \$771.36 | \$385.68 |
| Kaiser Maintenance Medical Plan | | | | | |
| Single | \$557.28 | N/A | \$501.56 | \$55.72 | \$27.86 |
| Two-Party | \$1,114.56 | N/A | \$1,003.10 | \$111.46 | \$55.73 |
| Family | \$1,588.32 | N/A | \$1,429.48 | \$158.84 | \$79.42 |
| Delta Dental Plan | | | | | |
| Single | \$54.84 | N/A | \$27.42 | \$27.42 | \$13.71 |
| Two-Party | \$109.64 | N/A | \$54.82 | \$54.82 | \$27.41 |
| Family | \$156.02 | N/A | \$78.02 | \$78.00 | \$39.00 |
| Kaiser Dental Plan | | | | | |
| Single | \$87.52 | N/A | \$43.76 | \$43.76 | \$21.88 |
| Two-Party | \$175.08 | N/A | \$87.54 | \$87.54 | \$43.77 |
| Family | \$249.48 | N/A | \$124.74 | \$124.74 | \$62.37 |
| Willamette Dental Plan | | | | | |
| Single | \$61.70 | N/A | \$30.86 | \$30.84 | \$15.42 |
| Two-Party | \$123.40 | N/A | \$61.70 | \$61.70 | \$30.85 |
| Family | \$175.90 | N/A | \$87.94 | \$87.96 | \$43.98 |

Adding Domestic Partners and their Children: Imputed Income Tax

Employees who enroll family members who do not qualify as a Qualified Relative under the IRS code are required to pay tax on the value of that dependent's health plan coverage.