CITY OF SPOKANE 2015 INSURANCE RATES LOCAL 270 and REGIONAL COUNCIL 270

		Health Level	Monthly City Contribution	Monthly Employee Contribution	Monthly Total Premium	Bi-monthly City Premium	Bi-monthly Employee Premium
City Plan III	Employee Only	C301	\$704.46	\$0.00	\$704.46	\$352.23	\$0.00
\$100/\$300 deductible	Employee & Spouse	C302	\$1,180.32	\$158.62	\$1,338.94	\$590.16	\$79.31
\$725 indiv/\$2175 fam	Employee, Spouse & Child(ren)	C303	\$1,532.80	\$276.10	\$1,808.90	\$766.40	\$138.05
out of pocket	Employee & Child(ren)	C305	\$1,056.94	\$117.48	\$1,174.42	\$528.47	\$58.74
City Plan IV	Employee Only	C401	\$641.48	\$0.00	\$641.48	\$320.74	\$0.00
\$500/\$1,500 deductible	Employee & Spouse	C402	\$1,120.46	\$98.76	\$1,219.22	\$560.23	\$49.38
\$1,000 indiv/\$3,000 fam	Employee, Spouse & Child(ren)	C403	\$1,451.94	\$195.26	\$1,647.20	\$725.97	\$97.63
out of pocket	Employee & Child(ren)	C405	\$1,004.44	\$65.00	\$1,069.44	\$502.22	\$32.50
Group Health	Employee Only	GH01	\$569.16	\$0.00	\$569.16	\$284.58	\$0.00
	Employee & Spouse	GH02	\$925.28	\$152.62	\$1,077.90	\$462.64	\$76.31
	Employee, Spouse & Child(ren)	GH03	\$1,163.38	\$254.66	\$1,418.04	\$581.69	\$127.33
	Employee & 1 Child	GH04	\$833.86	\$113.44	\$947.30	\$416.93	\$56.72
	Employee & Children	GH05	\$873.44	\$130.40	\$1,003.84	\$436.72	\$65.20
Group Health 2	Employee Only	GH21	\$503.70	\$0.00	\$503.70	\$251.85	\$0.00
	Employee & Spouse	GH22	\$862.68	\$90.00	\$952.68	\$431.34	\$45.00
	Employee, Spouse & Child(ren)	GH23	\$1,081.14	\$172.42	\$1,253.56	\$540.57	\$86.21
	Employee & 1 Child	GH24	\$779.02	\$58.58	\$837.60	\$389.51	\$29.29
	Employee & Children	GH25	\$815.32	\$72.26	\$887.58	\$407.66	\$36.13
Employee Life Insurance:1.5x base annual pay to \$100K max			0.25/\$K	\$0.00		0.125/\$K	
Dependent Life Insurance: \$5,000/\$2,000			\$1.04	\$0.00	\$1.04	\$0.52	
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\$99.00

\$0.00

\$99.00

Additionally, the City provides:

Dental Insurance

Employee Assistance Program (EAP)
Flexible Spending Accounts
COBRA Administration
Retiree Administration
Voluntary Life Insurance
Voluntary AFLAC Policies

\$49.50