

**CITY OF SPOKANE 2017 INSURANCE RATES
POLICE GUILD/LEOFF II
POLICE BOMB-SWAT/LEOFF II
POLICE HOSTAGE-DOG/LEOFF II**

		Health Level	Monthly City Contribution	Monthly Employee Contribution	Monthly Total Premium	Bi-monthly City Premium	Bi-monthly Employee Premium
City Plan III \$100/\$300 deductible \$625 indiv/\$1875 fam out of pocket maximum	Employee Only	C301	\$1,387.80	\$135.00	\$1,522.80	\$693.90	\$67.50
	Employee & Spouse	C302	\$1,387.80	\$135.00	\$1,522.80	\$693.90	\$67.50
	Employee, Spouse & Child(ren)	C303	\$1,387.80	\$135.00	\$1,522.80	\$693.90	\$67.50
	Employee & Child(ren)	C305	\$1,387.80	\$135.00	\$1,522.80	\$693.90	\$67.50
City Plan IV \$500/\$1,500 deductible \$1,000 indiv/\$3,000 fam out of pocket maximum	Employee Only	C401	\$1,365.66	\$105.00	\$1,470.66	\$682.83	\$52.50
	Employee & Spouse	C402	\$1,365.66	\$105.00	\$1,470.66	\$682.83	\$52.50
	Employee, Spouse & Child(ren)	C403	\$1,365.66	\$105.00	\$1,470.66	\$682.83	\$52.50
	Employee & Child(ren)	C405	\$1,365.66	\$105.00	\$1,470.66	\$682.83	\$52.50
Group Health 1 \$0/\$0 deductible \$2,000 indiv/\$4,000 fam out of pocket maximum	Employee Only	GH01	\$1,118.82	\$135.00	\$1,253.82	\$559.41	\$67.50
	Employee & Spouse	GH02	\$1,118.82	\$135.00	\$1,253.82	\$559.41	\$67.50
	Employee, Spouse & Child(ren)	GH03	\$1,118.82	\$135.00	\$1,253.82	\$559.41	\$67.50
	Employee & 1 Child	GH04	\$1,118.82	\$135.00	\$1,253.82	\$559.41	\$67.50
	Employee & Children	GH05	\$1,118.82	\$135.00	\$1,253.82	\$559.41	\$67.50
Group Health 2 \$100/\$300 deductible \$1,000 indiv/\$3,000 fam out of pocket maximum	Employee Only	GH21	\$1,057.86	\$105.00	\$1,162.86	\$528.93	\$52.50
	Employee & Spouse	GH22	\$1,057.86	\$105.00	\$1,162.86	\$528.93	\$52.50
	Employee, Spouse & Child(ren)	GH23	\$1,057.86	\$105.00	\$1,162.86	\$528.93	\$52.50
	Employee & 1 Child	GH24	\$1,057.86	\$105.00	\$1,162.86	\$528.93	\$52.50
	Employee & Children	GH25	\$1,057.86	\$105.00	\$1,162.86	\$528.93	\$52.50
Employee Life Insurance: \$10,000			\$2.50	\$0.00	\$2.50	\$1.25	
Employee Life Insurance: Bomb-Swat: 1.5 x to \$60,000 Max			0.25/\$K	\$0.00	\$0.00	.125/\$K	
Employee Life Insurance: Hostage-Dog: \$50,000			\$12.50	\$0.00	\$12.50	\$6.25	
Dependent Life Insurance: \$1,000/\$1,000			\$0.00	\$0.52	\$0.52		\$0.26
Dental Insurance - PPO			\$99.00	\$0.00	\$99.00	\$49.50	

Additionally, the City provides:

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