

Medical Plan Options - Premera

\$750 Deductible	Premium	Employer	Employee	VEBA
Employee Only	\$ 523.71	\$ 949.99	\$ (426.28)	\$ 426.28
Employee & Spouse	\$ 1,178.34	\$ 949.99	\$ 228.35	n/a
Employee & Children	\$ 916.50	\$ 949.99	\$ (33.49)	\$ 33.49
Family	\$ 1,571.13	\$ 949.99	\$ 621.14	n/a

\$1500 Deductible	Premium	Employer	Employee	VEBA
Employee Only	\$ 488.58	\$ 949.99	\$ (461.41)	\$ 461.41
Employee & Spouse	\$ 1,099.30	\$ 949.99	\$ 149.31	n/a
Employee & Children	\$ 855.02	\$ 949.99	\$ (94.97)	\$ 94.97
Family	\$ 1,465.74	\$ 949.99	\$ 515.75	n/a

\$3000 Deductible	Premium	Employer	Employee	VEBA
Employee Only	\$ 456.45	\$ 949.99	\$ (493.54)	\$ 493.54
Employee & Spouse	\$ 1,027.01	\$ 949.99	\$ 77.02	n/a
Employee & Children	\$ 798.79	\$ 949.99	\$ (151.20)	\$ 151.20
Family	\$ 1,369.35	\$ 949.99	\$ 419.36	n/a

\$2500 HDHP Qualified Plan	Premium	Employer	Employee	VEBA
Employee Only	\$ 428.85	\$ 949.99	\$ (521.14)	\$ 521.14
Employee & Spouse	\$ 964.91	\$ 949.99	\$ 14.92	n/a
Employee & Children	\$ 750.49	\$ 949.99	\$ (199.50)	\$ 199.50
Family	\$ 1,286.55	\$ 949.99	\$ 336.56	n/a

Dental Plan Options

Premera \$2000 Max. Ben.	Premium	Employer	Employee	
Employee Only	\$ 51.57	\$ 61.61	\$ (10.04)	\$ 10.04
Employee & Spouse	\$ 102.64	\$ 61.61	\$ 41.03	n/a
Employee & Children	\$ 122.07	\$ 61.61	\$ 60.46	n/a
Family	\$ 173.14	\$ 61.61	\$ 111.53	n/a

Premera \$1000 Max. Ben.	Premium	Employer	Employee	
Employee Only	\$ 34.84	\$ 61.61	\$ (26.77)	\$ 26.77
Employee & Spouse	\$ 67.68	\$ 61.61	\$ 6.07	n/a
Employee & Children	\$ 79.15	\$ 61.61	\$ 17.54	n/a
Family	\$ 112.00	\$ 61.61	\$ 50.39	n/a

Willamette Dental	Premium	Employer	Employee	VEBA
Composite Rate	\$117.00	\$ 61.61	\$ 55.39	n/a

Franklin County Benefits 2018

Rate Sheet

Sheriff's Deputies



Vision Plan

Vision Service Plan	Premium	Employer	Employee	VEBA
Composite Rate (for all "tiers")	\$ 18.03	\$ 13.84	\$ 4.19	n/a

Life & AD&D Insurance - Regence (Life Map)

\$30,000 policy	Employer Paid Benefit	\$ 4.56
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Employee Assistance Program

Life Map/Reliant Behavioral Health	Employer Paid Benefit
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Voluntary (employee pd) Life & AD&D- Regence (Life Map)

See summary for rate information
Various amounts for employee, spouse and dependent children

Long Term Disability / EAP - Life Map

CORE PLAN	Own Association
BUY UP PLAN	Own Association

Short Term Disability - Voluntary

60% of weekly earnings - see policy summary
Rates vary by age - see policy summary