

2025 Benefit Plans for Lewis County Non-Represented 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
Kaiser Permanente WA Classic \$175 individual/\$525 family				
Total Premium	1,070.89	1,970.17	1,745.35	2,644.64
Employer Paid	956.96	1,390.00	1,365.00	1,790.00
Employee Paid	113.93	580.17	380.35	854.64
Kaiser Permanente WA Value \$250 individual/\$750 family				
Total Premium	1,061.17	1,950.73	1,728.34	2,617.91
Employer Paid	942.04	1,390.00	1,359.67	1,790.00
Employee Paid	119.13	560.73	368.67	827.91
Kaiser Permanente WA CDHP \$1650 individual/\$3300 family (with health savings account)				
Total Premium	972.86	1,772.76	1,587.37	2,328.94
Employer Paid	914.62	1,390.00	1,358.48	1,790.00
Employee Paid	58.24	382.76	228.89	538.94
Uniform Medical Plan Classic \$250 individual/\$750 family				
Total Premium	1,076.01	1,980.42	1,754.32	2,658.73
Employer Paid	946.07	1,390.00	1,365.00	1,790.00
Employee Paid	129.94	590.42	389.32	868.73
Uniform Medical Plan CDHP \$1650 individual/\$3300 family (with health savings account)				
Total Premium	993.91	1,814.86	1,624.21	2,386.83
Employer Paid	919.16	1,388.09	1,357.13	1,790.00
Employee Paid	74.75	426.77	267.08	596.83
Uniform Medical Plan Select \$750 individual/\$2,250 family				
Total Premium	1,025.41	1,879.22	1,665.77	2,519.58
Employer Paid	928.89	1,390.00	1,361.93	1,790.00
Employee Paid	96.52	489.22	303.84	729.58

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

Vision Benefits: Davis Vision by Metlife, EyeMed Vision Care, or MetLife Vision (Employees must select a vision plan by November 25, 2024)

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

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

Long term disability benefit included in each plan:

Basic LTD Plan \$240 max/monthly

Employee LTD Buy-Up 60%, 50%, or decline

Dental Insurance Options:

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

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