

2026 Lewis County Health and Welfare Rate Sheet

AFSCME/Non-Represented Employees

Non-Rep/AFSCME		2026			
		Employee	Employee & Spouse	Employee & Children	Family
AETNA POS 500	Total Premium	\$ 980.01	\$ 1,803.57	\$ 1,597.66	\$ 2,421.57
Managed Choice Point of Service	Employer Paid	\$ 925.36	\$ 1,351.04	\$ 1,343.69	\$ 1,640.15
	Employee Paid	\$ 54.65	\$ 452.53	\$ 253.97	\$ 781.42
AETNA HDHP 2000	Total Premium	\$ 909.40	\$ 1,660.60	\$ 1,486.15	\$ 2,183.95
Managed Choice Point of Service	Employer Paid	\$ 909.40	\$ 1,351.04	\$ 1,343.69	\$ 1,640.15
High Deductible Health Plan	HSA ER Contribution	\$ 58.34	\$ 116.67	\$ 116.67	\$ 116.67
with Health Savings Account	Employee Paid	\$ -	\$ 309.56	\$ 142.46	\$ 543.80
AETNA POS 1000	Total Premium	\$ 950.56	\$ 1,742.04	\$ 1,544.17	\$ 2,335.65
Managed Choice Point of Service	Employer Paid	\$ 925.36	\$ 1,351.04	\$ 1,343.69	\$ 1,640.15
	Employee Paid	\$ 25.20	\$ 391.00	\$ 200.48	\$ 695.50

Lewis County contributes 100% of Metlife High Dental and Metlife Vision premiums

		Employee	Employee & Spouse	Employee & Children	Family
Dental	Total Premium	\$ 33.98	\$ 67.58	\$ 78.21	\$ 120.01
MetLife PDP Plus	Employer Paid	\$ 33.98	\$ 67.58	\$ 78.21	\$ 120.01
	Employee Paid	\$ -	\$ -	\$ -	\$ -

		Employee	Employee & Spouse	Employee & Children	Family
Vision	Total Premium	\$ 10.66	\$ 21.38	\$ 18.10	\$ 29.84
www.VSP.com	Employer Paid	\$ 10.66	\$ 21.38	\$ 18.10	\$ 29.84
by MetLife	Employee Paid	\$ -	\$ -	\$ -	\$ -

Metlife Basic Life and AD&D (\$35,000 each) additional \$5.57 employer paid contribution

Note: If an employee wavier any ancillary coverage (vision/dental), that employer paid benefit will not be redistributed to medical premiums.