

2027 Benefit Plans for Lewis County Dispatchers Guild

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	1,190.06	2,196.57	1,944.94	2,951.45
Employer Paid	1,071.05	1,976.91	1,750.45	2,656.31
Employee Paid	119.01	219.66	194.49	295.14
Kaiser Permanente WA Value	\$250 individual/\$750 family			
Total Premium	1,187.05	2,190.55	1,939.68	2,943.18
Employer Paid	1,068.35	1,971.50	1,745.71	2,648.86
Employee Paid	118.70	219.05	193.97	294.32
Kaiser Permanente WA CDHP	\$1750 individual/\$3500 family (with health savings account)			
Total Premium	1,094.57	2,004.43	1,791.55	2,643.08
Employer Paid	985.11	1,803.99	1,612.40	2,378.77
Employee Paid	109.46	200.44	179.15	264.31
Kaiser Permanente NW CDHP	\$1750 individual/\$3500 family (with health savings account)			
Total Premium	1,094.57	2,004.43	1,791.55	2,643.08
Employer Paid	985.11	1,803.99	1,612.40	2,378.77
Employee Paid	109.46	200.44	179.15	264.31
Uniform Medical Plan Classic	\$250 individual/\$750 family			
Total Premium	1,184.63	2,185.71	1,935.44	2,936.52
Employer Paid	1,066.17	1,967.14	1,741.90	2,642.87
Employee Paid	118.46	218.57	193.54	293.65
Uniform Medical Plan CDHP	\$1750 individual/\$3500 family (with health savings account)			
Total Premium	1,100.86	2,017.01	1,802.56	2,660.38
Employer Paid	990.77	1,815.31	1,622.30	2,394.34
Employee Paid	110.09	201.70	180.26	266.04
Uniform Medical Plan Select	\$750 individual/\$2,250 family			
Total Premium	1,121.83	2,060.11	1,825.54	2,763.82
Employer Paid	1,009.65	1,854.10	1,642.99	2,487.44
Employee Paid	112.18	206.01	182.55	276.38

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

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
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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)