

2025 Insurance Rates

City of Spokane

Local 270

		Health Level	Monthly City Contribution	Monthly Employee Contribution	Monthly Total Premium	Bi-monthly City Premium	Bi-monthly Employee Premium
Premera Plan 5 \$200/\$600 deductible \$1000 indiv/\$3000 fam out of pocket maximum	Employee Only	C15-1	\$763.26	\$90.46	\$853.72	\$381.63	\$45.23
	Employee & Spouse	C15-2	\$1,249.74	\$372.86	\$1,622.60	\$624.87	\$186.43
	Employee, Spouse & Child(ren)	C15-3	\$1,610.08	\$582.02	\$2,192.10	\$805.04	\$291.01
	Employee & Child(ren)	C15-5	\$1,123.60	\$299.64	\$1,423.24	\$561.80	\$149.82
Premera Plan 6 \$750/\$2250 deductible \$1500 indiv/\$4500 fam out of pocket maximum	Employee Only	C16-1	\$746.86	\$30.48	\$777.34	\$373.43	\$15.24
	Employee & Spouse	C16-2	\$1,288.54	\$189.00	\$1,477.54	\$644.27	\$94.50
	Employee, Spouse & Child(ren)	C16-3	\$1,651.26	\$344.92	\$1,996.18	\$825.63	\$172.46
	Employee & Child(ren)	C16-5	\$1,161.56	\$134.44	\$1,296.00	\$580.78	\$67.22
Kaiser Perm 3 \$200/\$400 deductible \$2000 indiv/\$4000 fam out of pocket maximum	Employee Only	G08-1	\$588.56	\$86.20	\$674.76	\$294.28	\$43.10
	Employee & Spouse	G08-2	\$970.18	\$307.72	\$1,277.90	\$485.09	\$153.86
	Employee, Spouse & Child(ren)	G08-3	\$1,225.30	\$455.80	\$1,681.10	\$612.65	\$227.90
	Employee & 1 Child	G08-4	\$872.18	\$250.82	\$1,123.00	\$436.09	\$125.41
	Employee & Children	G08-5	\$914.60	\$275.48	\$1,190.08	\$457.30	\$137.74
Kaiser Perm 4 \$500/\$1500 deductible \$1500 indiv/\$4500 fam out of pocket maximum	Employee Only	G09-1	\$570.12	\$27.04	\$597.16	\$285.06	\$13.52
	Employee & Spouse	G09-2	\$1,001.06	\$128.34	\$1,129.40	\$500.53	\$64.17
	Employee, Spouse & Child(ren)	G09-3	\$1,256.28	\$229.82	\$1,486.10	\$628.14	\$114.91
	Employee & 1 Child	G09-4	\$903.06	\$89.92	\$992.98	\$451.53	\$44.96
	Employee & Children	G09-5	\$945.50	\$106.68	\$1,052.18	\$472.75	\$53.34
Employee Life Insurance: 1.5x base annual pay to \$150,000			0.244/\$K	\$0.00	\$0.00	0.122/\$K	
Dependent Life Insurance: \$5,000/\$2,000			\$1.04	\$0.00	\$1.04	\$0.52	
Dental Insurance			\$99.00	\$0.00	\$99.00	\$49.50	

Employees' medical and dental contribution is pre-taxed dollars as allowed by Section 125.

Revised 10/10/2024