

Medical Plans	2024 SHA Share	2024 EE Share
City of Seattle Traditional - EE (with or without children)	\$1,747.52	\$0.00
City of Seattle Traditional - FAM	\$1,715.18	\$32.34
City of Seattle Preventive - EE (with or without children)	\$1,881.12	\$48.12
City of Seattle Preventive - FAM	\$1,830.74	\$98.50
Kaiser Standard - EE (with or without children)	\$1,346.68	\$48.40
Kaiser Standard - FAM	\$1,295.18	\$99.90
Kaiser Deductible - EE (with or without children)	\$1,260.71	\$25.00
Kaiser Deductible - FAM	\$1,228.79	\$56.92
Medical Waive	\$1,260.71	
Dental Plans and Vision	2024 SHA Share	2024 EE Share
Delta Dental of WA (formerly WA Dental)	\$120.66	\$0.00
Dental Health Services	\$142.65	\$0.00
Vision Service Plan	\$9.47	\$0.00
Vision Service Plan - Buy up plan	\$9.47	\$10.38

ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE Securian Financial	
<b>Monthly Premium: Fully paid by employee</b>	
Employee Only Coverage:	\$0.03 per \$1,000 of Benefit
Employee & Family Coverage:	\$0.04 per \$1,000 of Benefit

GROUP TERM LIFE INSURANCE Securian Financial	
<b>Basic Coverage: Monthly Premium: \$0.075 per \$1,000 of benefit</b>	
City Share:	\$ .030
Employee Deduction:	\$0.045
<b>Supplemental Coverage: Monthly Premium per \$1,000 of coverage</b>	
<u>Age</u>	<u>Premium</u>
Under 25	\$0.024
25 - 29	\$0.024
30 - 34	\$0.035
35 - 39	\$0.047
40 - 44	\$0.066
45 - 49	\$0.112
50 - 54	\$0.171
55 - 59	\$0.266
60 - 64	\$0.407
65+	\$0.708
<b>Dependent Child Supplemental Life (one premium covers all children)</b>	
Coverage Amount	Premium
\$2,000	\$0.36
\$5,000	\$0.90
\$10,000	\$1.80

LONG-TERM DISABILITY INSURANCE The Hartford	
<b>Non-Uniformed Employees Plan Monthly Premium:</b>	
City-Paid Basic Coverage:	.142% of first \$667 of insured earn
Employee-Paid Optional Coverage:	.384% of next \$7,666 of insured e