



## Health Insurance Premium Cost-Share

This cost-share worksheet applies to Council Members\*

**All below listed benefits are provided through the Association of WA Cities  
(AWC) Employee Benefit Trust**

Plan Year: 2023			
ACW Healthfirst® 250	Monthly Premium	City Per Month	Council Monthly
Employee	854.62	854.62	0.00
Employee & spouse	1,716.38	854.62	861.76
Employee, spouse + one child	2,140.90	854.62	1,286.28
Employee, spouse + two children (full family)	2,491.88	854.62	1,637.26
Employee + one child	1,279.12	854.62	424.50
Employee + two children	1,630.10	854.62	775.48

Kaiser 200	Monthly Premium	City Per Month	Employee Monthly
Employee	746.88	746.88	0.00
Employee & spouse	1,481.34	746.88	734.46
Employee, spouse + one child	1,856.08	746.88	1,109.20
Employee, spouse + two children (full family)	2,230.86	746.88	1,483.98
Employee + one child	1,121.66	746.88	374.78
Employee + two children	1,496.40	746.88	749.52

Delta Dental Plan F + Ortho III	Monthly Premium	City Per Month	Employee Monthly
Employee	57.14	57.14	0.00
Employee + 1	108.80	57.14	51.66
Employee + 2	187.64	57.14	130.50

VSP	Monthly Premium	City Per Month	Employee Monthly
Employee	9.54	9.54	0.00
Employee + 1	19.06	9.54	9.52
Employee + 2	28.58	9.54	19.04

ComPsych Employee Assistance Program (EAP)	Monthly Premium	City Per Month	Employee Monthly
1-3 Session Model (with any Trust Benefit)	included	included	included
1-3 Session Model (with no Trust Benefit)	1.49	0.00	1.49

***The City received the Well City Award in 2021 and the related premium reduction is included in the 2023 premium rates.***

\*Council receives \$921.30 monthly (100% of highest cost medical + dental + vision for themselves only) to apply towards benefits, or can choose to receive it as additional cash compensation.