

## 2025 Non-Commissioned Police Benefits-at-a-Glance

<b>Medical</b>	Regence High Deductible	City pays 100% for employee; 90% for spouse/dependents
	Regence 250	The employee pays the difference in premiums between the high deductible plan (including the VEBA contribution) and the 250 deductible plan.
<b>Dental</b>	AWC Delta Dental Plan E w/ Ortho IV	City pays 100% for employee; 90% for spouse/dependents
	AWC Willamette \$15 Copay	City pays 100% for employee; 90% for spouse/dependents
<b>Vision</b>	AWC VSP - \$0 Co-pay plan	City pays 100%
<b>Life</b>	\$20,000	Provided by Standard Insurance through AWC
<b>Deferred Comp</b>	1% effective January 1, 2025	
<b>Retirement</b>	PERS 2 or 3	
<b>Gym Membership</b>	Up to \$40 reimbursement for an individual membership to a healthclub facility (must attend 8 times per month)	

*\$1500 or \$3000 VEBA depending on employee only or family coverage*

### MEDICAL

		Medical Opt-Out (incentive paid to employee)		
Regence HD Plan	Premiums	Employee Share	Employee & Dependents	Spouse / Dependents
Active Employee	663.82	0.00	298.72	
Employee/Spouse	1335.80	67.20	570.87	272.15
Employee/1 Child	1000.78	33.70	435.19	136.47
Employee/ 2+ Children	1276.68	61.29	546.93	248.21
Employee/Spouse/1 Child	1672.76	100.89	707.34	408.62
Employee/Spouse/2 Children	1948.66	128.48	819.08	520.36

### DENTAL

Delta Dental with Ortho Rider	Premiums	Employee Share
Employee	49.66	0.00
Employee + 1	93.38	4.37
Employee +2 or more	187.26	13.76

Willamette Dental	Premiums	Employee Share
Employee	52.6	0.00
Employee + 1	101.42	4.88
Employee +2 or more	167.28	11.47

### MEDICAL

Regence 250 Plan	Premiums	Employee Share
Active Employee	954.62	165.80
Employee/Spouse	1917.22	331.42
Employee/1 Child	1428.82	178.04
Employee/ 2+ Children	1820.84	294.16
Employee/Spouse/1 Child	2391.40	468.64
Employee/Spouse/2 Children	2783.44	584.78

### VISION

Vision VSP	Premiums	Employee Share
Employee	10.96	0.00
Employee + 1	21.92	0.00
Employee +2 or more	32.88	0.00