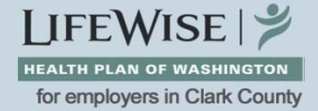




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## 2012 Medical Plan Rates

# Premera Blue Cross PPO Plans

	Employee	Employee & Spouse*	Employee & Child(ren)	Employee, Spouse* & Child(ren)	Composite
<b>WCIF High Deductible Health Plan</b>	\$468.88	\$1,042.67	\$851.17	\$1,424.97	\$785.93
<b>WCIF 750</b>	\$548.63	\$1,202.35	\$984.38	\$1,638.09	\$993.06
<b>WCIF 500</b>	\$637.56	\$1,393.34	\$1,141.41	\$1,897.18	\$1,190.42
<b>WCIF 200</b>	\$888.65	\$1,915.84	\$1,568.90	\$2,596.08	\$1,767.27
Active LEOFF I WCIF 200	\$888.65	\$1,915.84	\$1,568.90	\$2,596.08	\$1,767.27

\* or qualified domestic partner



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GroupHealth

## 2012 Medical Plan Rates

# Group Health HMO Plans

	Employee	Employee & Spouse*	Employee & Child(ren)	Employee, Spouse* & Child(ren)	Composite
<b>Select 750 Plan</b>	\$606.71	\$1,091.51	\$1,044.74	\$1,621.35	\$1,460.66
Active LEOFF I Select 750 Plan	\$753.29	\$1,238.09	\$1,191.32	\$1,767.94	n/a
<b>Options 200 Plan</b>	\$746.58	\$1,297.87	\$1,242.21	\$1,928.59	\$1,774.90
Active LEOFF I Options 200 Plan	\$893.17	\$1,444.45	\$1,388.79	\$2,075.18	n/a
<b>Options Plan A</b>	\$814.98	\$1,449.88	\$1,387.65	\$2,154.90	\$1,955.90
Active LEOFF I Options A	\$961.57	\$1,596.46	\$1,534.24	\$2,301.49	n/a

\* or qualified domestic partner

## 2012 Dental Plan Rates

# Washington Dental Service (WDS) Plans

		Employee	Employee + 1 Dependent	Employee + 1 or More Dependents	Employee + 2 or More Dependents	Composite
PPO PLANS	<b>Plan A-1</b> \$1,000 annual maximum, 100% employer paid	\$47.83	n/a	\$133.63	n/a	\$92.39
	<b>Plan B-4</b> \$2,000 annual maximum, 100% employer paid except dependents	\$50.62	\$90.20	n/a	\$162.20	n/a
ENHANCED PLANS	<b>Plan C-1</b> \$1,000 annual maximum, 100% employer paid	\$50.49	n/a	\$140.47	n/a	\$97.43
	<b>Plan C-2</b> \$1,000 annual maximum, 100% employer paid except dependents	\$50.49	\$89.98	n/a	\$162.37	n/a
	<b>Plan D-3</b> \$2,000 annual maximum, 100% employer paid	\$53.42	n/a	\$148.06	n/a	\$106.32
	<b>Plan D-4</b> \$2,000 annual maximum, 100% employer paid except dependents	\$53.42	\$94.65	n/a	\$170.68	n/a
INCENTIVE	<b>Incentive Plan 1</b> \$2,000 annual maximum, 100% employer paid	\$53.96	n/a	\$149.44	n/a	\$107.32

\* or qualified domestic partner



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## 2012 Dental Plan Rates

# Willamette Dental of Washington (WDW) Plan

	Employee	Employee + 1 Dependent	Employee + 2 or More Dependents	Composite
Willamette Dental Plan	\$55.77	\$92.81	\$148.52	\$93.62

*\* or qualified domestic partner*



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## 2012 Vision Plan Rates

# Vision Service Plan (VSP) Plans

	Employee	Employee & Spouse*	Employee & Child(ren)	Employee, Spouse* & Child(ren)	Composite
<b>Budget Plan</b>	\$6.29	\$11.95	\$11.01	\$16.67	\$12.37
<b>Standard Plan</b>	\$8.93	\$16.95	\$15.61	\$23.64	\$17.38
<b>Extended Plan</b>	\$12.54	\$23.82	\$21.93	\$33.22	\$23.48

\* or qualified domestic partner

## 2012 Employee Assistance Program (EAP) Rates

### Magellan Health Services EAP Plan

	Employee, Spouse* & Child(ren)
<b>EAP 6-1 Visit Plan</b>	<b>\$1.94</b>

*\* or qualified domestic partner*

NOTE: *The Magellan EAP Plan is bundled with all WCIF medical plans. It is also available as a separate coverage at the rate listed above. EAP is an employer paid benefit. If an employer elects to offer EAP, all eligible employees must be covered.*

## 2012 Life Plan Rates

# The Standard Life Plans

### BASIC LIFE & AD&D

*Mandatory, employer-paid benefit. All eligible employees must be enrolled.*

<b>Employee Basic Life &amp; AD&amp;D</b>	\$0.15 per \$1,000
<b>Dependent Basic Life (1 or more)</b>	\$0.65 for \$1,000 benefit

### VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT

<b>Employee</b>	\$0.025 per \$1,000
<b>Spouse*</b>	\$0.025 per \$1,000
<b>Child</b>	\$0.030 per \$1,000

### VOLUNTARY TERM LIFE | cost per unit (unit = \$10,000)

AGE	EMPLOYEE	SPOUSE*
Under 20	\$0.56	\$0.60
20 - 24	\$0.66	\$0.70
25 - 29	\$0.71	\$0.75
30 - 34	\$0.82	\$0.90
35 - 39	\$0.98	\$1.05
40 - 44	\$1.45	\$1.55
45 - 49	\$2.35	\$2.45
50 - 54	\$3.91	\$4.09
55 - 59	\$5.81	\$5.87
60 - 64	\$8.74	\$9.57
65 - 69	\$12.53	\$13.53
70 +	\$12.53	n/a
<b>CHILD(REN)</b>	\$0.44 per \$2,000	

\* or qualified domestic partner



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## 2012 Disability Plan Rates

# The Standard Long Term Disability (LTD) Plans

### BASE LONG TERM DISABILITY PLAN

*Base LTD is an employer paid benefit.*

*If offered, all eligible employees must be enrolled.*

#### BUNDLED IN MEDICAL

\$5.36

#### STAND ALONE (no medical)

\$5.86

*Employees must be enrolled in Base LTD to purchase Voluntary Buy-Up LTD. Rates are \$0.50 higher if medical plans are not offered through WCIF.*

### VOLUNTARY BUY-UP LONG TERM DISABILITY PLAN

MONTHLY SALARY RANGE	MONTHLY PREMIUM DUE	
	BUNDLED IN MEDICAL	STAND ALONE (no medical)
\$1,000 - \$1,499	\$6.25	\$6.75
\$1,500 - \$1,999	\$8.75	\$9.25
\$2,000 - \$2,499	\$11.25	\$11.75
\$2,500 - \$2,999	\$13.75	\$14.25
\$3,000 - \$3,499	\$16.25	\$16.75
\$3,500 - \$3,999	\$18.75	\$19.25
\$4,000 - \$4,499	\$21.25	\$21.75
\$4,500 - \$4,999	\$23.75	\$24.25
\$5,000 - \$5,499	\$26.25	\$26.75
\$5,500 - \$5,999	\$28.75	\$29.25
\$6,000 - \$6,499	\$31.25	\$31.75
\$6,500 - \$6,999	\$33.75	\$34.25
\$7,000 - \$7,499	\$36.25	\$36.75
\$7,500 - \$7,999	\$38.75	\$39.25
\$8,000 - \$8,499	\$41.25	\$41.75
\$8,500 - \$8,999	\$43.75	\$44.25
\$9,000 - \$9,499	\$46.25	\$46.75
\$9,500 - \$10,000	\$48.75	\$49.25



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## 2012 Disability Plan Rates

# The Standard Voluntary Short Term Disability (VSTD) Plans

VOLUNTARY SHORT TERM DISABILITY PLANS		
MONTHLY SALARY RANGE	MONTHLY PREMIUM DUE	
	180-DAY COVERAGE <i>coincides with Base LTD enrollment</i>	90-DAY COVERAGE <i>coincides with Buy-Up LTD enrollment</i>
\$999 or under	\$10.80	\$9.30
\$1,000 - \$1,499	\$12.30	\$10.30
\$1,500 - \$1,999	\$14.80	\$11.30
\$2,000 - \$2,499	\$16.80	\$12.80
\$2,500 - \$2,999	\$19.30	\$14.30
\$3,000 - \$3,499	\$20.80	\$15.30
\$3,500 - \$3,999	\$23.30	\$16.30
\$4,000 - \$4,499	\$25.30	\$17.80
\$4,500 - \$4,999	\$26.80	\$18.80
\$5,000 - \$5,499	\$28.80	\$19.80
\$5,500 - \$5,999	\$30.80	\$21.30
\$6,000 - \$6,499	\$32.80	\$22.30
\$6,500 - \$6,999	\$34.80	\$23.80
\$7,000 +	\$37.30	\$24.80

*Employees may enroll in Voluntary Short Term Disability without being enrolled in a Long Term Disability policy. In this instance they may choose to enroll in either the 90-day or the 180-day VSTD policy.*



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## 2012 Consumer Driven Health Plan Rates administered by **Benefit Solutions, Inc. (BSI)**

### FSA/HSA PLANS *including Dependent Daycare Assistance Program (DCAP)*

FSA/HSA/DCAP ADMINISTRATION	DEBIT CARD
\$5.25 FSA/HSA/DCAP per enrollee per month	\$1 one time fee per card \$10 replacement fee per card*

\* Replacement card fee is billed to the member.



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# 2012 Retiree Plan Rates

## Medical, Dental & Vision Plans

### Medical Plans:

for members under age 65

	Retiree	Retiree & Spouse*	Retiree & Child(ren)	Retiree, Spouse* & Child(ren)
<b>Premera WCIF 750</b>	\$676.13	\$1,493.27	\$1,220.79	\$2,037.92
Retired LEOFF I Premera WCIF 200	\$881.20	\$1,908.39	\$1,561.45	\$2,588.63
<b>Group Health Select 750</b>	\$804.19	\$1,303.17	\$1,246.94	\$1,940.13
Retired LEOFF I Group Health Select 750	\$950.78	\$1,449.75	\$1,393.53	\$2,086.73

For over age 65 Medical Plans see Sterling Medicare Supplement Plan information.

Sterling Medicare Supplement Plan rates vary by member location.

### Dental Plan:

	Retiree	Spouse*	Child(ren)
<b>WDS Retiree Plan</b> \$2,000 annual maximum, \$50 / \$150 deductible	\$62.23	\$62.15	\$61.30

### Vision Plan:

	Retiree	Retiree, Spouse* & Child(ren)
<b>VSP Retiree Plan</b>	\$8.49	\$19.80

\* or qualified domestic partner