

# 2021 City of Springfield Insurance Rates

## SPA

<b>Monthly Medical, Wellness Center &amp; Vision Insurance:</b>			
<b>PacificSource Health</b>	Employee Cost (Pre-Tax)	Employer Cost (Non-Taxable)	Total Monthly Cost:
Employee	\$ 17.86	\$ 577.52	\$ 595.38
Employee +1	\$ 39.26	\$ 1,269.72	\$ 1,308.98
Employee +2 (or more)	\$ 53.52	\$ 1,730.64	\$ 1,784.16

<b>Monthly Dental Insurance:</b>			
<b>MODA/Delta Dental</b>	Employee Cost (Pre-Tax)	Employer Cost (Non-Taxable)	Total Monthly Cost:
Employee	\$ 1.94	\$ 63.06	\$ 65.00
Employee +1	\$ 3.12	\$ 100.94	\$ 104.06
Employee +2 (or more)	\$ 5.14	\$ 166.48	\$ 171.62
<b>MODA/Delta Dental Plus</b>	Employee Cost (Pre-Tax)	Employer Cost (Non-Taxable)	Total Monthly Cost:
Employee	\$ 2.34	\$ 75.80	\$ 78.14
Employee +1	\$ 3.74	\$ 121.34	\$ 125.08
Employee +2 (or more)	\$ 6.18	\$ 200.12	\$ 206.30
<b>Willamette Dental</b>	Employee Cost (Pre-Tax)	Employer Cost (Non-Taxable)	Total Monthly Cost:
Employee	\$ 1.76	\$ 57.40	\$ 59.16
Employee +1	\$ 2.92	\$ 94.38	\$ 97.30
Employee +2 (or more)	\$ 4.82	\$ 155.94	\$ 160.76

### Domestic Partner (DP) Coverage:

When adding a DP & DP's child, the IRS requires the value to add the DP and DP's child be taxed before other tax qualified dependents are added

<b>Monthly Medical, Wellness Center &amp; Vision Insurance:</b>					
<b>PacificSource Health</b>	Employee Cost (Pre-Tax)	Employee Cost (After-Tax)	Employer Cost (Non-Taxable)	Employer Cost (taxable)	Total Monthly Cost:
Employee +1 DP	\$ 17.86	\$ 21.40	\$ 577.52	\$ 692.20	\$ 1,308.98
Employee & dependent +1DP	\$ 32.13	\$ 21.40	\$ 1,038.43	\$ 692.20	\$ 1,784.16
Employee + 2 DP	\$ 17.86	\$ 35.66	\$ 577.52	\$ 1,153.12	\$ 1,784.16

<b>Monthly Dental Insurance:</b>					
<b>MODA/Delta Dental</b>	Employee Cost (Pre-Tax)	Employee Cost (After-Tax)	Employer Cost (Non-Taxable)	Employer Cost (taxable)	Total Monthly Cost:
Employee +1 DP	\$ 1.94	\$ 1.18	\$ 63.06	\$ 37.88	\$ 104.06
Employee & dependent +1DP	\$ 3.96	\$ 1.18	\$ 128.60	\$ 37.88	\$ 171.62
Employee + 2 DP	\$ 1.94	\$ 3.20	\$ 63.06	\$ 103.42	\$ 171.62
<b>MODA/Delta Dental Plus</b>	Employee Cost (Pre-Tax)	Employee Cost (After-Tax)	Employer Cost (Non-Taxable)	Employer Cost (taxable)	Total Monthly Cost:
Employee +1 DP	\$ 2.34	\$ 1.40	\$ 75.80	\$ 45.54	\$ 125.08
Employee & dependent +1DP	\$ 4.78	\$ 1.40	\$ 154.58	\$ 45.54	\$ 206.30
Employee + 2 DP	\$ 2.34	\$ 3.83	\$ 75.80	\$ 124.33	\$ 206.30
<b>Willamette Dental</b>	Employee Cost (Pre-Tax)	Employee Cost (After-Tax)	Employer Cost (Non-Taxable)	Employer Cost (taxable)	Total Monthly Cost:
Employee +1 DP	\$ 1.76	\$ 1.15	\$ 57.40	\$ 36.99	\$ 97.30
Employee & dependent +1DP	\$ 3.67	\$ 1.15	\$ 118.95	\$ 36.99	\$ 160.76
Employee + 2 DP	\$ 1.76	\$ 3.06	\$ 57.40	\$ 98.54	\$ 160.76