



## Yakima County Medical Rates

### Public Services - Solid Waste

Effective Date: 01-01-2025

Solid Waste (100% FTE)				
	Employee Only	Employee & Spouse	Employee & Child(ren)	Employee & Family
United Employees Benefit Trust Medical Plan A6	\$ 1,048.00	\$ 1,048.00	\$ 1,048.00	\$ 1,048.00
United Employees Benefit Trust Vision Plan V3	\$ 20.00	\$ 20.00	\$ 20.00	\$ 20.00
Washington Teamsters Welfare Trust Dental Plan A	\$ 120.50	\$ 120.50	\$ 120.50	\$ 120.50
Symetra	\$ 2.40	\$ 2.40	\$ 2.40	\$ 2.40
<b>Total Cost of Package</b>	<b>\$ 1,190.90</b>	<b>\$ 1,190.90</b>	<b>\$ 1,190.90</b>	<b>\$ 1,190.90</b>
<b>Yakima County Maximum Contribution For Premium:</b>	<b>\$ 1,176.00</b>	<b>\$ 1,176.00</b>	<b>\$ 1,176.00</b>	<b>\$ 1,176.00</b>
<b>Employee Monthly Premium Rates (Your Cost)</b>	<b>\$ 14.90</b>	<b>\$ 14.90</b>	<b>\$ 14.90</b>	<b>\$ 14.90</b>

YAKIMA COUNTY MAXIMUM CONTRIBUTION FOR PREMIUM: \$ 1,176.00

Solid Waste (80% FTE)				
	Employee Only	Employee & Spouse	Employee & Child(ren)	Employee & Family
United Employees Benefit Trust Medical Plan A6	\$ 1,048.00	\$ 1,048.00	\$ 1,048.00	\$ 1,048.00
United Employees Benefit Trust Vision Plan V3	\$ 20.00	\$ 20.00	\$ 20.00	\$ 20.00
Washington Teamsters Welfare Trust Dental Plan B	\$ 120.50	\$ 120.50	\$ 120.50	\$ 120.50
Symetra	\$ 2.40	\$ 2.40	\$ 2.40	\$ 2.40
<b>Total Cost of Package</b>	<b>1,190.90</b>	<b>1,190.90</b>	<b>1,190.90</b>	<b>1,190.90</b>
<b>Yakima County Maximum Contribution For Premium:</b>	<b>\$ 1,003.52</b>	<b>\$ 1,003.52</b>	<b>\$ 1,003.52</b>	<b>\$ 1,003.52</b>
<b>Employee Monthly Premium Rates (Your Cost)</b>	<b>\$ 187.38</b>	<b>\$ 187.38</b>	<b>\$ 187.38</b>	<b>\$ 187.38</b>

YAKIMA COUNTY MAXIMUM CONTRIBUTION FOR PREMIUM: \$ 1,003.52

Solid Waste (75% FTE)				
	Employee Only	Employee & Spouse	Employee & Child(ren)	Employee & Family
United Employees Benefit Trust Medical Plan A6	\$ 1,048.00	\$ 1,048.00	\$ 1,048.00	\$ 1,048.00
United Employees Benefit Trust Vision Plan V3	\$ 20.00	\$ 20.00	\$ 20.00	\$ 20.00
Washington Teamsters Welfare Trust Dental Plan B	\$ 120.50	\$ 120.50	\$ 120.50	\$ 120.50
Symetra	\$ 2.40	\$ 2.40	\$ 2.40	\$ 2.40
<b>Total Cost of Package</b>	<b>\$ 1,190.90</b>	<b>\$ 1,190.90</b>	<b>\$ 1,190.90</b>	<b>\$ 1,190.90</b>
<b>Yakima County Maximum Contribution For Premium:</b>	<b>\$ 940.80</b>	<b>\$ 940.80</b>	<b>\$ 940.80</b>	<b>\$ 940.80</b>
<b>Employee Monthly Premium Rates (Your Cost)</b>	<b>\$ 250.10</b>	<b>\$ 250.10</b>	<b>\$ 250.10</b>	<b>\$ 250.10</b>

YAKIMA COUNTY MAXIMUM CONTRIBUTION FOR PREMIUM: \$ 940.80

Note: Employer contributions and employee out of pocket amounts are subject to change based on agreements reached through the collective bargaining process.