

PAEOP

****1.0 FTE****

If you work full time (1.0 fte) you will find your monthly cost for medical on the payroll deduction chart below (mandatory benefits already deducted):

PAEOP - Full time (1.0 Benefit FTE) Employee Monthly Cost for Medical*					
Medical Plan Option	Kaiser HMO	Kaiser PPO - \$350	Kaiser PPO - \$750	Kaiser PPO - \$2,500	Kaiser QHDHP
Employee	138.24	148.49	71.78	42.91	50.65
Employee + Spouse	797.39	816.44	673.82	620.14	634.53
Employee + Child	419.48	433.49	328.66	289.20	299.78
Employee + Children	470.59	485.28	375.34	333.96	345.05
Employee + Spouse & Child	1,078.63	1,101.45	930.70	866.43	883.66
Employee + Spouse & Children	1,129.74	1,153.23	977.37	911.19	928.94
*Benefit package includes at no cost to employee: Dental, Vision, Life/AD&D & LTD					

Your mandatory benefit package includes:

Family dental coverage: Choice of Delta Dental or Willamette

Family vision coverage: VSP – Vision Service Plan

50,000 Life/AD&D Insurance– Cigna

Long Term Disability – Cigna

HCA Retiree Subsidy

For less than 8 hours per day (part-time employee), see the next page to calculate the monthly allocation you have available for cost of medical coverage.

PAEOP

****NON-1.0 FTE****

If you work part-time, follow the instructions in the table below to determine the monthly amount that you have available to pay for medical coverage:

Please note that if your hours change during the year, your benefit FTE will update automatically and your deduction amount will change accordingly.

Line #1 below:	<p>Multiply your average number of hours/day by how many days you are contracted to work/year. PAEOP employees can have a variety of calendars, depending on your position. If you don't know for sure how many days per year you work, please contact Benefits at benefits@puvallup.k12.wa.us. Then divide that number by 1,440. This is your "Allocation Factor," it cannot be greater than 1.0.</p> <p>Example Calculation: 5 hrs per day X 190 days per year ÷ 1440 = .6597 (round to the nearest tenth)</p>
Line #2 below:	<p>Multiply the number on Line #1 by \$843.97, this year's monthly State Allocation. This is the monthly amount of State Allocation that you are entitled to based on your allocation factor.</p> <p>In the example above: 0.6597 x \$843.97 = \$556.77</p>
Line #3 below:	<p>The cost of mandatory benefits for PAEOP employees is \$215.18 per month. Subtract this cost from your calculated State Allocation amount in Line #2. This is the monthly amount of allocation you have available for the cost of medical coverage.</p> <p>Review the total premiums for each plan below to see your cost of coverage.</p> <p>In the example above: \$556.77 - \$215.18 = \$341.59</p>

Line #1	Allocation Factor (1.0 Maximum)
Line #2	Available State Allocation Funds (Line #1 x \$843.97)
Line #3	Amount available for cost of medical coverage (Line #2 – cost of mandatory benefits from the chart below)

Total Monthly Premiums for Each Plan					
Medical Plan Option	Kaiser HMO	Kaiser PPO - \$350	Kaiser PPO - \$750	Kaiser PPO - \$2,500	Kaiser QHDHP
Employee	767.03	777.28	700.57	671.70	679.44
Employee + Spouse	1,426.18	1,445.23	1,302.61	1,248.93	1,263.32
Employee + Child	1,048.27	1,062.28	957.45	917.99	928.57
Employee + Children	1,099.38	1,114.07	1,004.13	962.75	973.84
Employee + Spouse & Child	1,707.42	1,730.24	1,559.49	1,495.22	1,512.45
Employee + Spouse & Children	1,758.53	1,782.02	1,606.16	1,539.98	1,557.73

Please Note that pooling is NOT included in these calculations.