

How Much Do the Benefits Cost?

2017-2018 Benefit Costs and Employee Premium Shares

For *full-time employees*, the City of Portland will pay 95% of the cost of the CityNet medical/VSP vision and Delta Dental Plan of Oregon dental coverage and you will contribute 5% of the cost for this coverage. This is called your “premium share.” If you elect the Kaiser plan, your premium share will depend on the cost of the Kaiser plans in relation to the cost of the CityNet/VSP/Delta Dental plans. If the cost is less than 95% of the CityNet plans, then you will not have a premium share for the Kaiser plans. If the cost is greater than the CityNet plans, you will pay the difference. The City will cover 100% of your premium share for the CityHDP/vision plan. Full-time employees who elect the CityHDP plan will still pay 5% towards the cost of the Dental Delta Core plan and Kaiser Dental option. **Note:** Table does not include costs for supplemental life insurance coverage. Costs for this optional benefit is based on your age. Your personalized cost for this plan is available in the online enrollment system at www.portlandoregon.gov/benefits.

For *part-time employees*, the City of Portland contributes 50% of your medical/vision and dental premium costs. You will contribute 50% of the cost. The following table shows the total cost of these benefits and provides employee premium amounts per-pay-period for the current plan year.

Plan	TOTAL Monthly Benefit Costs			Your Contribution Per Pay Period			Your Contribution Per Pay Period		
				(Full-time Employees)			(Part-time Employees)		
	Employee Only	Employee + 1	Family	Employee Only	Employee + 1	Family	Employee Only	Employee + 1	Family
CityNet Medical, VSP Vision and Delta Dental Plan of Oregon	\$740.35	\$1,431.91	\$1,961.85	\$18.42	\$35.71	\$48.96	\$185.09	\$357.98	\$490.46
CityNet Medical, VSP Vision and Kaiser Dental	\$751.49	\$1,469.35	\$1,991.38	\$18.70	\$36.64	\$49.70	\$187.87	\$367.34	\$497.85
CityHDP Medical, VSP Vision and Delta Dental Plan of Oregon	\$565.07	\$1,078.31	\$1,483.61	\$1.39	\$2.41	\$4.28	\$141.27	\$269.58	\$370.90
CityHDP Medical, VSP Vision and Kaiser Dental	\$576.21	\$1,115.75	\$1,513.14	\$1.67	\$3.34	\$5.02	\$144.05	\$278.94	\$378.29
Kaiser Medical, Vision and Dental	\$689.29	\$1,334.67	\$1,980.05	\$0	\$0	\$58.05	\$172.32	\$333.67	\$495.01
Kaiser Medical, Vision and Delta Dental of Oregon	\$678.15	\$1,297.23	\$1,950.52	\$0	\$0	\$43.29	\$169.54	\$324.31	\$487.63
If you choose the Delta Dental Buy-up plan option, add this much to your cost:	\$8.63	\$14.93	\$26.53	\$4.32	\$7.47	\$13.27	\$4.32	\$7.47	\$13.27
If you choose the VSP Vision Buy-up option, add this much to your cost:	\$6.27	\$11.38	\$15.18	\$3.14	\$5.69	\$7.59	\$3.14	\$5.69	\$7.59