

# 2025 Cost of Coverage

## Police Assistant Chiefs and Commanders

Medical/ Dental/ Vision	Total Plan Cost Per Month	City of Kent Monthly Cost	Employee Monthly Cost	Employee Cost Per Pay Period (24 pay periods)
<b>Premera – CCP linked with HSA</b>				
Employee Only	\$751.00	\$751.00	\$0.00	\$0.00
Employee + Spouse	\$1,502.00	\$1,502.00	\$0.00	\$0.00
Employee + Child(ren)	\$1,427.00	\$1,427.00	\$0.00	\$0.00
Employee + Family	\$2,180.00	\$2,180.00	\$0.00	\$0.00
<b>Premera – 80/20</b>				
Employee Only	\$838.00	\$838.00	\$0.00	\$0.00
Employee + Spouse	\$1,708.00	\$1,691.00	\$17.00	\$8.50
Employee + Child(ren)	\$1,614.00	\$1,598.00	\$16.00	\$8.00
Employee + Family	\$2,471.00	\$2,438.00	\$33.00	\$16.50
<b>Kaiser Permanente (HMO)</b>				
Employee Only	\$1,020.64	\$1,020.64	\$0.00	\$0.00
Employee + Spouse	\$2,080.88	\$1,921.88	\$159.00	\$79.50
Employee + Child(ren)	\$1,966.26	\$1,824.26	\$142.00	\$71.00
Employee + Family	\$3,009.95	\$2,807.95	\$202.00	\$101.00
<b>Premera \$15 Copay - Plan Closed</b> Available only to new KPOA hires and employees currently enrolled in the plan.				
Employee Only	\$947.00	\$947.00	\$0.00	\$0.00
Employee + Spouse	\$1,925.00	\$1,778.00	\$147.00	\$73.50
Employee + Child(ren)	\$1,818.00	\$1,687.00	\$131.00	\$65.50
Employee + Family	\$2,782.00	\$2,580.00	\$202.00	\$101.00