

# 2026 Insurance Rates - COBRA

## Police Guild and Police LTs and CAPTs

PLAN	COVERAGE	PREMIUM*	2% ADMIN FEE	TOTAL PREMIUM	MEDICAL & DENTAL PREMIUM
<b>CITY DENTAL PLAN</b>					
(PPO Plan with \$1,250 Max)	EMPLOYEE ONLY	55.73	1.11	56.84	
	EMPLOYEE & SPOUSE	100.53	2.01	102.54	
	EMPLOYEE, SPOUSE AND CHILD(REN)	151.44	3.03	154.47	
	EMPLOYEE & CHILD(REN)	106.64	2.13	108.77	
	SPOUSE	59.80	1.20	61.00	
	SPOUSE & CHILD(REN)	110.71	2.21	112.92	
	CHILD	65.91	1.32	67.23	
<b>PREMERA 3</b>					
(Rx \$10/\$20)	EMPLOYEE ONLY	2,425.90	48.52	2,474.42	2,531.26
	EMPLOYEE & SPOUSE	2,425.90	48.52	2,474.42	2,576.96
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,425.90	48.52	2,474.42	2,628.89
<i>LEOFF II POLICE</i>	EMPLOYEE & CHILD(REN)	2,425.90	48.52	2,474.42	2,583.19
<i>LEOFF II LTS AND CPTS</i>	SPOUSE	1,943.72	38.87	1,982.59	2,043.59
	SPOUSE & CHILD(REN)	1,943.72	38.87	1,982.59	2,095.52
	CHILD	1,943.72	38.87	1,982.59	2,049.82
<b>PREMERA 4</b>					
(Rx \$10/\$30)	EMPLOYEE ONLY	2,343.35	46.87	2,390.22	2,447.06
	EMPLOYEE & SPOUSE	2,343.35	46.87	2,390.22	2,492.76
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,343.35	46.87	2,390.22	2,544.69
<i>LEOFF II POLICE</i>	EMPLOYEE & CHILD(REN)	2,343.35	46.87	2,390.22	2,498.99
<i>LEOFF II LTS AND CPTS</i>	SPOUSE	1,877.68	37.55	1,915.23	1,976.23
	SPOUSE & CHILD(REN)	1,877.68	37.55	1,915.23	2,028.16
	CHILD	1,877.68	37.55	1,915.23	1,982.46
<b>KAISER PERMANENTE 1</b>					
(Rx \$10/\$30, Vision \$200/\$50)	EMPLOYEE ONLY	2,000.10	40.00	2,040.10	2,096.95
	EMPLOYEE & SPOUSE	2,000.10	40.00	2,040.10	2,142.64
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,000.10	40.00	2,040.10	2,194.57
	EMPLOYEE & ONE CHILD	2,000.10	40.00	2,040.10	2,148.87
<i>LEOFF II POLICE</i>	EMPLOYEE & CHILDREN	2,000.10	40.00	2,040.10	2,148.87
<i>LEOFF II LTS AND CPTS</i>	SPOUSE	1,603.08	32.06	1,635.14	1,696.14
	SPOUSE & ONE CHILD	1,603.08	32.06	1,635.14	1,748.07
	SPOUSE & CHILDREN	1,603.08	32.06	1,635.14	1,748.07
	CHILD	1,603.08	32.06	1,635.14	1,702.37
	CHILDREN	1,603.08	32.06	1,635.14	1,702.37
<b>KAISER PERMANENTE 2</b>					
(Rx \$10/\$30, Vision \$50)	EMPLOYEE ONLY	1,856.08	37.12	1,893.20	1,950.04
	EMPLOYEE & SPOUSE	1,856.08	37.12	1,893.20	1,995.74
	EMPLOYEE, SPOUSE AND CHILD(REN)	1,856.08	37.12	1,893.20	2,047.67
	EMPLOYEE & ONE CHILD	1,856.08	37.12	1,893.20	2,001.97
<i>LEOFF II POLICE</i>	EMPLOYEE & CHILDREN	1,856.08	37.12	1,893.20	2,001.97
<i>LEOFF II LTS AND CPTS</i>	SPOUSE	1,487.86	29.76	1,517.62	1,578.61
	SPOUSE & ONE CHILD	1,487.86	29.76	1,517.62	1,630.54
	SPOUSE & CHILDREN	1,487.86	29.76	1,517.62	1,630.54
	CHILD	1,487.86	29.76	1,517.62	1,584.85
	CHILDREN	1,487.86	29.76	1,517.62	1,584.85

\*premium includes a \$15.00 admin fee

**2026 Insurance Rates - COBRA**  
**Managerial A and B**  
**Exempt Confidential**  
**Mayor/Council**  
**Fire Managers**

PLAN	COVERAGE	PREMIUM*	2% ADMIN FEE	TOTAL PREMIUM	MEDICAL & CITY DENTAL PREMIUM
<b>CITY DENTAL PLAN</b>					
(PPO Plan with \$1,500 Max)	EMPLOYEE ONLY	57.37	1.15	58.52	
	EMPLOYEE & SPOUSE	103.98	2.08	106.06	
	EMPLOYEE, SPOUSE AND CHILD(REN)	156.94	3.14	160.08	
	EMPLOYEE & CHILD(REN)	110.33	2.21	112.54	
	SPOUSE	61.61	1.23	62.84	
	SPOUSE & CHILD(REN)	114.57	2.29	116.86	
	CHILD	67.96	1.36	69.32	
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<b>PREMERA Plan 7</b>					
	EMPLOYEE ONLY	1,021.48	20.43	1,041.90	1,100.42
	EMPLOYEE & SPOUSE	1,927.95	38.56	1,966.51	2,072.57
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,599.44	51.99	2,651.43	2,811.51
	EMPLOYEE & CHILD(REN)	1,692.98	33.86	1,726.83	1,839.37
	SPOUSE	921.48	18.43	939.90	1,002.75
	SPOUSE & CHILD(REN)	1,592.96	31.86	1,624.82	1,741.68
	CHILD	686.50	13.73	700.23	769.55
	ADULT CHILD (age 26)	1,021.48	20.43	1,041.90	1,111.22
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<b>KAISER PERMANENTE Plan 5</b>					
	EMPLOYEE ONLY	927.98	18.56	946.53	1,005.05
	EMPLOYEE & SPOUSE	1,745.30	34.91	1,780.21	1,886.27
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,295.85	45.92	2,341.77	2,501.85
	EMPLOYEE & ONE CHILD	1,537.75	30.76	1,568.51	1,681.04
	EMPLOYEE & CHILDREN	1,630.70	32.61	1,663.31	1,775.85
	SPOUSE	832.33	16.65	848.97	911.81
	SPOUSE & ONE CHILD	1,442.10	28.84	1,470.94	1,587.80
	SPOUSE & CHILDREN	1,535.05	30.70	1,565.75	1,682.61
	CHILD	624.78	12.50	637.27	706.59
	CHILDREN	717.73	14.35	732.08	801.40
	ADULT CHILD (age 26)	927.98	18.56	946.53	1,015.85

\*premium includes a \$15.00 admin fee

# 2026 Insurance Rates - COBRA

## Local 270-PA

PLAN	COVERAGE	PREMIUM*	2% ADMIN FEE	TOTAL PREMIUM	MEDICAL & CITY DENTAL PREMIUM
<b>CITY DENTAL PLAN</b>					
(PPO Plan with \$1,250 max)	EMPLOYEE ONLY	55.73	1.11	56.84	
	EMPLOYEE & SPOUSE	100.53	2.01	102.54	
	EMPLOYEE, SPOUSE AND CHILD(REN)	151.44	3.03	154.47	
	EMPLOYEE & CHILD(REN)	106.64	2.13	108.77	
	SPOUSE	59.80	1.20	61.00	
	SPOUSE & CHILD(REN)	110.71	2.21	112.92	
	CHILD	65.91	1.32	67.23	
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<b>PREMERA 3</b>					
(Rx \$10/\$20)	EMPLOYEE ONLY	1,108.63	22.17	1,130.80	1,187.64
	EMPLOYEE & SPOUSE	2,093.63	41.87	2,135.50	2,238.04
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,823.25	56.47	2,879.72	3,034.18
	EMPLOYEE & CHILD(REN)	1,838.23	36.76	1,874.99	1,983.76
	SPOUSE	1,000.00	20.00	1,020.00	1,081.00
	SPOUSE & CHILD(REN)	1,729.63	34.59	1,764.22	1,877.14
	CHILD	744.60	14.89	759.49	826.72
	ADULT CHILD (age 26)	1,108.63	22.17	1,130.80	1,198.03
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<b>PREMERA 4</b>					
(Rx \$10/\$30)	EMPLOYEE ONLY	1,071.20	21.42	1,092.62	1,149.47
	EMPLOYEE & SPOUSE	2,022.48	40.45	2,062.92	2,165.47
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,727.20	54.54	2,781.74	2,936.21
	EMPLOYEE & CHILD(REN)	1,775.88	35.52	1,811.39	1,920.17
	SPOUSE	966.28	19.33	985.60	1,046.60
	SPOUSE & CHILD(REN)	1,671.00	33.42	1,704.42	1,817.34
	CHILD	719.68	14.39	734.07	801.30
	ADULT CHILD (age 26)	1,071.20	21.42	1,092.62	1,159.85
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<b>KAISER PERMANENTE 1</b>					
(Rx \$10/\$30, Vision \$200)	EMPLOYEE ONLY	913.63	18.27	931.90	988.74
	EMPLOYEE & SPOUSE	1,720.85	34.42	1,755.27	1,857.81
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,259.98	45.20	2,305.17	2,459.64
	EMPLOYEE & ONE CHILD	1,513.83	30.28	1,544.10	1,652.87
	EMPLOYEE & CHILDREN	1,605.25	32.11	1,637.36	1,746.13
	SPOUSE	822.23	16.44	838.67	899.67
	SPOUSE & ONE CHILD	1,422.43	28.45	1,450.87	1,563.80
	SPOUSE & CHILDREN	1,513.85	30.28	1,544.13	1,657.05
	CHILD	615.20	12.30	627.50	694.73
	CHILDREN	706.63	14.13	720.76	787.99
	ADULT CHILD (age 26)	913.63	18.27	931.90	999.13
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<b>KAISER PERMANENTE 2</b>					
(Rx \$10/\$30, Vision \$50)	EMPLOYEE ONLY	844.38	16.89	861.26	918.11
	EMPLOYEE & SPOUSE	1,583.68	31.67	1,615.35	1,717.89
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,079.00	41.58	2,120.58	2,275.05
	EMPLOYEE & ONE CHILD	1,394.15	27.88	1,422.03	1,530.81
	EMPLOYEE & CHILDREN	1,476.48	29.53	1,506.00	1,614.78
	SPOUSE	754.30	15.09	769.39	830.38
	SPOUSE & ONE CHILD	1,304.08	26.08	1,330.16	1,443.08
	SPOUSE & CHILDREN	1,386.40	27.73	1,414.13	1,527.05
	CHILD	564.78	11.30	576.07	643.30
	CHILDREN	647.10	12.94	660.04	727.27
	ADULT CHILD (age 26)	844.38	16.89	861.26	928.49

\*premium includes a \$15.00 admin fee

## 2026 Insurance Rates - COBRA Library Managers

PLAN	COVERAGE	PREMIUM*	2% ADMIN FEE	TOTAL PREMIUM	MEDICAL & CITY DENTAL PREMIUM
<b>CITY DENTAL PLAN</b>					
(PPO Plan with \$1,500 Max)					
	EMPLOYEE ONLY	57.37	1.15	58.52	
	EMPLOYEE & SPOUSE	103.98	2.08	106.06	
	EMPLOYEE, SPOUSE AND CHILD(REN)	156.94	3.14	160.08	
	EMPLOYEE & CHILD(REN)	110.33	2.21	112.54	
	SPOUSE	61.61	1.23	62.84	
	SPOUSE & CHILD(REN)	114.57	2.29	116.86	
	CHILD	67.96	1.36	69.32	
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<b>PREMERA 5</b>					
	EMPLOYEE ONLY	1,082.15	21.64	1,103.79	1,162.31
	EMPLOYEE & SPOUSE	2,043.25	40.87	2,084.12	2,190.17
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,755.13	55.10	2,810.23	2,970.31
	EMPLOYEE & CHILD(REN)	1,794.05	35.88	1,829.93	1,942.47
	SPOUSE	976.10	19.52	995.62	1,058.46
	SPOUSE & CHILD(REN)	1,687.98	33.76	1,721.73	1,838.60
	CHILD	726.90	14.54	741.44	810.76
	ADULT CHILD (age 26)	1,082.15	21.64	1,103.79	1,173.11
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<b>PREMERA 6</b>					
	EMPLOYEE ONLY	986.68	19.73	1,006.41	1,064.93
	EMPLOYEE & SPOUSE	1,861.93	37.24	1,899.16	2,005.22
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,510.23	50.20	2,560.43	2,720.51
	EMPLOYEE & CHILD(REN)	1,635.00	32.70	1,667.70	1,780.24
	SPOUSE	890.25	17.81	908.06	970.90
	SPOUSE & CHILD(REN)	1,538.55	30.77	1,569.32	1,686.18
	CHILD	663.33	13.27	676.59	745.91
	ADULT CHILD (age 26)	986.68	19.73	1,006.41	1,075.73
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<b>KAISER PERMANENTE 3</b>					
	EMPLOYEE ONLY	858.45	17.17	875.62	934.14
	EMPLOYEE & SPOUSE	1,612.38	32.25	1,644.62	1,750.68
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,116.38	42.33	2,158.70	2,318.78
	EMPLOYEE & ONE CHILD	1,418.75	28.38	1,447.13	1,559.66
	EMPLOYEE & CHILDREN	1,502.60	30.05	1,532.65	1,645.19
	SPOUSE	768.93	15.38	784.30	847.15
	SPOUSE & ONE CHILD	1,329.23	26.58	1,355.81	1,472.67
	SPOUSE & CHILDREN	1,413.08	28.26	1,441.34	1,558.20
	CHILD	575.30	11.51	586.81	656.13
	CHILDREN	659.15	13.18	672.33	741.65
	ADULT CHILD (age 26)	858.45	17.17	875.62	944.94
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<b>KAISER PERMANENTE 4</b>					
	EMPLOYEE ONLY	761.45	15.23	776.68	835.20
	EMPLOYEE & SPOUSE	1,426.75	28.54	1,455.29	1,561.34
	EMPLOYEE, SPOUSE AND CHILD(REN)	1,872.63	37.45	1,910.08	2,070.16
	EMPLOYEE & ONE CHILD	1,256.23	25.12	1,281.35	1,393.89
	EMPLOYEE & CHILDREN	1,330.23	26.60	1,356.83	1,469.37
	SPOUSE	680.30	13.61	693.91	756.75
	SPOUSE & ONE CHILD	1,175.08	23.50	1,198.58	1,315.44
	SPOUSE & CHILDREN	1,249.08	24.98	1,274.06	1,390.92
	CHILD	509.78	10.20	519.97	589.29
	CHILDREN	583.78	11.68	595.45	664.77
	ADULT CHILD (age 26)	761.45	15.23	776.68	846.00

\*premium includes a \$15.00 admin fee

# 2026 Insurance Rates - COBRA

## Local 270 and Library 270

PLAN	COVERAGE	PREMIUM*	2% ADMIN FEE	TOTAL PREMIUM	MEDICAL & CITY DENTAL PREMIUM
<b>CITY DENTAL PLAN</b>					
(PPO Plan with \$1,250 Max)					
	EMPLOYEE ONLY	55.73	1.11	56.84	
	EMPLOYEE & SPOUSE	100.53	2.01	102.54	
	EMPLOYEE, SPOUSE AND CHILD(REN)	151.44	3.03	154.47	
	EMPLOYEE & CHILD(REN)	106.64	2.13	108.77	
	SPOUSE	59.80	1.20	61.00	
	SPOUSE & CHILD(REN)	110.71	2.21	112.92	
	CHILD	65.91	1.32	67.23	
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<b>PREMERA 5</b>					
	EMPLOYEE ONLY	1,082.15	21.64	1,103.79	1,160.64
	EMPLOYEE & SPOUSE	2,043.25	40.87	2,084.12	2,186.66
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,755.13	55.10	2,810.23	2,964.70
	EMPLOYEE & CHILD(REN)	1,794.05	35.88	1,829.93	1,938.70
	SPOUSE	976.10	19.52	995.62	1,056.62
	SPOUSE & CHILD(REN)	1,687.98	33.76	1,721.73	1,834.66
	CHILD	726.90	14.54	741.44	808.67
	ADULT CHILD (age 26)	1,082.15	21.64	1,103.79	1,171.02
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<b>PREMERA 6</b>					
	EMPLOYEE ONLY	986.68	19.73	1,006.41	1,063.25
	EMPLOYEE & SPOUSE	1,861.93	37.24	1,899.16	2,001.70
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,510.23	50.20	2,560.43	2,714.90
	EMPLOYEE & CHILD(REN)	1,635.00	32.70	1,667.70	1,776.47
	SPOUSE	890.25	17.81	908.06	969.05
	SPOUSE & CHILD(REN)	1,538.55	30.77	1,569.32	1,682.25
	CHILD	663.33	13.27	676.59	743.82
	ADULT CHILD (age 26)	986.68	19.73	1,006.41	1,073.64
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<b>KAISER PERMANENTE 3</b>					
	EMPLOYEE ONLY	858.45	17.17	875.62	932.46
	EMPLOYEE & SPOUSE	1,612.38	32.25	1,644.62	1,747.16
	EMPLOYEE, SPOUSE AND CHILD(REN)	2,116.38	42.33	2,158.70	2,313.17
	EMPLOYEE & ONE CHILD	1,418.75	28.38	1,447.13	1,555.90
	EMPLOYEE & CHILDREN	1,502.60	30.05	1,532.65	1,641.42
	SPOUSE	768.93	15.38	784.30	845.30
	SPOUSE & ONE CHILD	1,329.23	26.58	1,355.81	1,468.73
	SPOUSE & CHILDREN	1,413.08	28.26	1,441.34	1,554.26
	CHILD	575.30	11.51	586.81	654.03
	CHILDREN	659.15	13.18	672.33	739.56
	ADULT CHILD (age 26)	858.45	17.17	875.62	942.85
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<b>KAISER PERMANENTE 4</b>					
	EMPLOYEE ONLY	761.45	15.23	776.68	833.52
	EMPLOYEE & SPOUSE	1,426.75	28.54	1,455.29	1,557.83
	EMPLOYEE, SPOUSE AND CHILD(REN)	1,872.63	37.45	1,910.08	2,064.55
	EMPLOYEE & ONE CHILD	1,256.23	25.12	1,281.35	1,390.12
	EMPLOYEE & CHILDREN	1,330.23	26.60	1,356.83	1,465.60
	SPOUSE	680.30	13.61	693.91	754.90
	SPOUSE & ONE CHILD	1,175.08	23.50	1,198.58	1,311.50
	SPOUSE & CHILDREN	1,249.08	24.98	1,274.06	1,386.98
	CHILD	509.78	10.20	519.97	587.20
	CHILDREN	583.78	11.68	595.45	662.68
	ADULT CHILD (age 26)	761.45	15.23	776.68	843.91

\*premium includes a \$15.00 admin fee