

2026 Insurance Rates

City of Spokane

Spokane City Retirees and Families

(No Subsidy)

		Benefit Code	Monthly Actual Premium	Admin Fee	Total Premium
Premera: Retirees and/or Dependents wo/Medicare \$500/\$1000 deductible Benefits paid at 70% \$3,500 out of pocket maximum	Retiree Only	R03-1	\$916.91	\$15.00	\$931.91
	Retiree & Spouse	R03-2	\$2,016.98	\$15.00	\$2,031.98
	Retiree, Spouse & Children	R03-3	\$2,475.33	\$15.00	\$2,490.33
	Retiree & Children	R03-5	\$1,375.26	\$15.00	\$1,390.26
	Spouse Only*	R09-6	\$1,100.09	\$15.00	\$1,115.09
	Spouse and Children*	R09-8	\$1,558.44	\$15.00	\$1,573.44
	Children Only*	R09-10	\$458.35	\$15.00	\$473.35
Kaiser: Retirees and/or Dependents wo/Medicare \$500/\$1000 deductible Benefits paid at 70% \$3,000 out of pocket maximum	Retiree Only	G02-1	\$944.41	\$15.00	\$959.41
	Retiree & Spouse	G02-2	\$2,077.49	\$15.00	\$2,092.49
	Retiree, Spouse & Children	G02-3	\$2,549.60	\$15.00	\$2,564.60
	Retiree & Children	G02-5	\$1,416.53	\$15.00	\$1,431.53
	Spouse Only*	G02-6	\$1,133.09	\$15.00	\$1,148.09
	Spouse and Children*	G02-8	\$1,605.20	\$15.00	\$1,620.20
	Children Only*	G02-10	\$472.13	\$15.00	\$487.13

***Retiree must be enrolled on Medicare or LEOFF I**

Premium increased 25.0%