

SHERIFF CORRECTIONS

2015 Monthly Benefit Rates

Benton County's Total Monthly Employer Contribution: **\$1234.15**

AVAILABLE PLANS	MONTHLY RATES
MEDICAL PLANS	
Washington Teamsters Welfare Trust Medical Plan B - Composite (Employee & Dependents)	\$ 1,135.90
DENTAL PLANS	
Washington Teamsters Welfare Trust Dental Plan A - Composite (Employee & Dependents)	\$ 130.50
VISION PLAN	
Washington Teamsters Welfare Trust Vision Plan EXT - Composite (Employee & Dependents)	\$ 14.90
BASIC LIFE INSURANCE PLAN	
Standard Basic Life Insurance - \$12,000 - Employee	\$ 1.80
TIME LOSS PLAN	
Washington Teamsters Welfare Trust Time Loss Plan A - Employee	\$ 16.00
TOTAL with medical, dental, vision, basic life, and time loss	\$ 1,299.10
NOTE: The employer will pay 95% of the cost of the premium for medical, dental, vision, basic life insurance, and time loss. The employee portion of 5% will be paid by payroll deduction. Any additional amounts above the 95% employer contribution necessary to pay insurance premiums for coverage elected by the employee shall be paid by the employee through payroll deductions.	

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