



CIS Regence Co-Pay Plan F Rx7 w/Alternative Care

Effective January 1, 2024 - December 31, 2024

New employees are eligible for Health Insurance benefits the first day of the month following a full 30 days of employment.

Regence CIS Trust Vision Plan A Delta Dental	Medical/ Vision Premium	Dental Premium	Total Premium	Employee Monthly Deduction
Employee Only	\$847.32	\$57.26	\$904.58	\$90.46
Employee + Child	\$1,572.79	\$ 88.74	\$1,661.53	\$166.15
Employee + Children	\$2,100.61	\$151.00	\$2,251.61	\$225.16
Employee + Spouse	\$1,797.59	\$100.76	\$1,898.34	\$189.84
Employee + Family	\$2,422.78	\$173.64	\$2,596.42	\$259.64

Regence CIS Trust Vision Plan A Willamette Dental	Medical/ Vision Premium	Dental Premium	Total Premium	Employee Monthly Deduction
Employee Only	\$847.32	\$59.46	\$906.78	\$90.68
Employee + Child	\$1,572.79	\$92.32	\$1,665.11	\$166.51
Employee + Children	\$2,100.61	\$157.53	\$2,258.14	\$225.81
Employee + Spouse	\$1,797.59	\$104.86	\$1,902.45	\$190.25
Employee + Family	\$2,422.78	\$181.18	\$2,603.96	\$260.40

Premiums are based on an FTE of .75 (30 hours per week) or above. Employees working a regular schedule of less than 30 hours per week pay a pro-rated premium amount based on budgeted FTE.