## **2023 Resident Rates Per Pay Period Rates**

Deductions taken from 24 of 26 pay periods.

# **MEDICAL (pre-tax)** Election of waive medical coverage certifies that the team member has coverage elsewhere as required by the Affordable Care Act.

	Employee Only	Employee and Spouse	Employee and Child(ren)	Employee, Spouse and Child(ren)
Virginia Mason Select Plan	\$23.00	\$130.50	\$58.50	\$166.00
Virginia Mason Essential Plan	\$13.50	\$117.00	\$24.00	\$127.00
Virginia Mason Health Savings Plan	\$0.00	\$91.00	\$0.00	\$99.50

DENTAL (pre-tax)				
	Employee Only	Employee and Spouse	Employee and Child(ren)	Employee, Spouse and Child(ren)
Delta Dental of Washington				
Standard Plan	\$6.00	\$14.50	\$19.50	\$27.50
Enhanced Plan	\$8.00	\$22.50	\$24.50	\$42.00
Willamette Plan	\$7.00	\$15.00	\$21.00	\$29.00

VISION HARDWARE (pre-tax)				
	Employee Only	Employee and Spouse	Employee and Child(ren)	Employee, Spouse and Child(ren)
EyeMed Vision Care	\$2.50	\$4.50	\$4.00	\$7.00
Virginia Mason Visual Effects	All employees are eligible without enrollment			

SHORT-TERM DISABILITY (post-tax)	If your hourly rate of pay is			
	Under \$23.00 \$23.00 - \$38.00 Over \$38.00			
Available only to Full-Time Staff; rate				
based on hourly wage	\$12.00	\$18.00	\$28.50	

### **LONG-TERM DISABILITY (0.75 FTE+)**

Provided by Virginia Mason

ACCIDENT – VOLUNTARY BENEFIT (post-tax)				
	Employee Only	Employee and Spouse	Employee and Child(ren)	Employee, Spouse and Child(ren)
Accident insurance	\$7.09	\$11.47	\$14.20	\$17.91

## **2023 Resident Rates Per Pay Period Rates**

CRITICAL ILLNESS – VOLUNTARY BENEFIT (post-tax)				
Attained Age	Employee Only	Employee and Spouse	Employee and Child(ren)	Employee, Spouse and Child(ren)
<25	\$2.40	\$4.05	\$4.80	\$6.45
25-29	\$2.55	\$4.50	\$4.95	\$6.90
30-34	\$3.90	\$6.60	\$6.30	\$9.00
35-39	\$5.85	\$9.75	\$8.25	\$12.15
40-44	\$9.15	\$15.00	\$11.55	\$17.40
45-49	\$13.65	\$22.35	\$16.05	\$24.75
50-54	\$19.35	\$32.10	\$21.75	\$34.50
55-59	\$27.00	\$45.45	\$29.40	\$47.85
60-64	\$39.00	\$66.45	\$41.40	\$68.85
65-69	\$58.95	\$100.50	\$61.35	\$102.90
70+	\$91.65	\$152.85	\$94.05	\$155.25

LEGAL SERVICES – VOLUNTARY BENEFIT (post-tax)		
Employee Only		
Legal services	\$9.25	

### **Team Member Domestic Partner Rates and Imputed Income**

Your certified domestic partner (same or opposite sex) and their children are considered to be eligible dependents under Virginia Mason's Benefit plans. Children of domestic partners can be enrolled for benefits whether the partner is covered on the plan or not.

#### Tax Effect

The Federal Government does not recognize domestic partners or their children as tax dependents, therefore there is a tax on the portion of the benefit that Virginia Mason pays for the domestic partner and their children's coverage – this is known as imputed income. For more information, consult your tax advisor. Imputed income will show on your paycheck for each of 24 pay periods per year.

