

## 2019 DOMESTIC PARTNERS – IMPUTED VALUE

Plan	Imputed Tax Value		
	Partner	Partner Child(ren)	Partner & Partner Child(ren)
Kaiser HMO/Kaiser 100	\$776.69	\$543.67	\$1320.36
Kaiser HMO Part-Time/Kaiser 100 PT	\$657.51	\$460.23	\$1117.74
Kaiser Deductible/Kaiser Deductible 350	\$709.47	\$496.64	\$1206.11
Kaiser Deductible Part-Time/ Kaiser Deductible 350 PT	\$576.63	\$403.63	\$980.26
PEBB Statewide/PEBB Statewide 350	\$795.70	\$556.99	\$1352.68
PEBB Statewide Part-Time/ PEBB Statewide 350 PT	\$646.38	\$452.47	\$1098.85
Providence Choice PPO/Providence Choice 350	\$689.99	\$482.99	\$1172.99
Providence Choice PPO Part-Time/Providence Choice 350 PT	\$559.15	\$391.40	\$950.56
MODA Summit and Synergy/Higher Deductible	\$706.49	\$494.55	\$1201.05
MODA Summit and Synergy PT/Higher Deductible	\$575.18	\$402.63	\$977.82
Plan	Imputed Tax Value		
	Partner	Partner Child(ren)	Partner & Partner Child(ren)
VSP Vision	\$8.88	\$6.22	\$15.10
VSP Plus	\$13.31	\$9.32	\$22.64
Plan	Imputed Tax Value		
	Partner	Partner Child(ren)	Partner & Partner Child(ren)
Delta Dental Premier (Formally MODA Premier Dental)	\$55.33	\$38.73	\$94.06
Delta Dental PPO (Formally MODA PPO Dental)	\$51.13	\$35.78	\$86.91
Delta Dental Part-time (Formally MODA Dental Part-Time)	\$39.81	\$27.87	\$67.69
Kaiser Traditional Dental	\$63.53	\$44.48	\$108.01
Kaiser Traditional Dental Part-Time	\$47.38	\$33.17	\$80.56
Willamette Managed Dental	\$52.32	\$36.65	\$88.96