

2021 Benefit Costs

TEA DOT Employees



King County

Benefits, Payroll and
Retirement Operations

These rates pertain to Department of Transportation employees who are represented by the Technical Employees Association (TEA DOT) union. Members of this group also contribute toward the cost of medical coverage as follows: \$40/month for employee only coverage and \$75/month for family (employee plus dependents) coverage.

COBRA/Retiree Medical Rates: TEA Employees		
Plan	2020 Monthly Rates	2021 Monthly Rates
KingCare (Regence)		
– Employee	\$877.45	\$900.05
– Spouse	\$877.45	\$900.05
– Child(ren)	\$701.96	\$720.04
– Employee + Spouse	\$1,754.90	\$1,800.10
– Employee + Child(ren)	\$1,579.41	\$1,620.09
– Family	\$2,456.86	\$2,520.14
SmartCare (Kaiser)		
– Employee	\$562.72	\$582.45
– Spouse	\$562.72	\$582.45
– Child(ren)	\$450.17	\$465.95
– Employee + Spouse	\$1,125.44	\$1,164.90
– Employee + Child(ren)	\$1,012.89	\$1,048.40
– Family	\$1,575.61	\$1,630.85
Delta Dental of Washington (COBRA)		
– Employee	\$65.42	\$63.34
– Spouse	\$65.42	\$63.34
– Child(ren)	\$52.33	\$50.67
– Employee + Spouse	\$130.84	\$126.68
– Employee + Child(ren)	\$117.75	\$114.01
– Family	\$183.17	\$177.35
Vision Service Plan		
– Employee	\$12.00	\$11.80
– Spouse	\$12.00	\$11.80
– Child(ren)	\$9.60	\$9.44
– Employee + Spouse	\$24.00	\$23.60
– Employee + Child(ren)	\$21.60	\$21.24
– Family	\$33.60	\$33.04
Delta Dental of Washington (Retiree)		
– Employee	\$77.50	\$71.42
– Spouse	\$77.52	\$71.42
– Child(ren)	\$72.42	\$66.72
– Employee + Spouse	\$155.02	\$142.84
– Employee + Child(ren)	\$149.92	\$138.14
– Family	\$227.44	\$209.56

Supplemental AD&D Rates: TEA Employees				
Amount of Coverage	Employee	Spouse/Dom. Partner 50% of employee coverage	Spouse/Dom. Partner 100% of employee coverage	All Children 10% of employee
\$50,000	\$0.85	\$0.43	\$0.85	\$0.25
\$100,000	\$1.70	\$0.85	\$1.70	\$0.50
\$150,000	\$2.55	\$1.28	\$2.55	\$0.75
\$200,000	\$3.40	\$1.70	\$3.40	\$1.00
\$250,000	\$4.25	\$2.13	\$4.25	\$1.25
\$300,000	\$5.10	\$2.55	\$5.10	\$1.50
\$350,000	\$5.95	\$2.98	\$5.95	\$1.75
\$400,000	\$6.80	\$3.40	\$6.80	\$2.00
\$450,000	\$7.65	\$3.83	\$7.65	\$2.25
\$500,000	\$8.50	\$4.25	\$8.50	\$2.50

Supplemental Life Calculator: TEA Employees	
Employee Coverage Amount:	(coverage capped at \$400,000)
Base Annual Salary (BAS) Multiply by (1x, 2x, 3x, 4x) → Round up to the next \$1,000 = _____	
Employee Cost:	
Employee Coverage → Divide by \$1,000 → Multiply by Employee age rate _____ =	\$ _____
Spouse/Domestic Partner Cost: (*Use spouse rate but employee age bracket)	
Employee Coverage Multiply by .5 → Divide by \$1,000 → Multiply by Spouse age rate* _____ =	+ \$ _____
Child Cost: \$.90 a month to cover all children at \$10,000 of coverage =	+ \$ _____
Monthly Cost	\$ _____

Supplemental Life Rates: TEA Employees											
	Under 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
Employee	\$.033	\$.039	\$.054	\$.054	\$.068	\$.109	\$.188	\$.334	\$.445	\$.761	\$1.236
Spouse/ Domestic Partner	\$.044	\$.054	\$.071	\$.080	\$.089	\$.133	\$.204	\$.382	\$.587	\$1.129	\$1.831

Supplemental Long-Term Disability Calculator: TEA Employees
Base Annual Salary / 100 x 0.327 = Annual Cost (divide by 12 for monthly cost)