Employee Retirement Guide



This guide provides information, forms, lists of things to do, and resources to use when you retire from King County employment. Phone numbers are provided for most resources; where no TTY number is listed, please call 711 to access the TTY relay service.

For additional information, attend King County's Road to Retirement Class and refer to the benefits summary that applies to you on the Benefits, Payroll and Retirement website: kingcounty.gov/benefits.

Road to Retirement classes are held virtually each month. To enroll, go to <u>Eventbrite</u> or e-mail <u>kc.orientations@kingcounty.gov</u>.

If you still have questions, contact Benefits, Payroll and Retirement Operations at 206-684-1556 or kc.benefits@kingcounty.gov.

We've made every attempt to ensure the accuracy of this information. However, if there is any discrepancy between the benefit descriptions and the insurance contracts or other legal documents, the legal documents will always govern. King County intends to continue benefit plans indefinitely, but reserves the right to amend or terminate them at any time in whole or in part, for any reason, according to the amendment and termination procedures described in the legal documents. King County, as plan administrator, has the sole discretionary authority to determine eligibility for benefits and to construe the terms of the plans. This information doesn't create a contract of employment between King County and any employee.

Call 206-684-1556 for alternate formats.

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Section 1: Letting key staff know you're leaving

When you retire, you must notify your supervisor, your Payroll/Human Resources representative, and Benefits, Payroll and Retirement Operations. If your Human Resources unit doesn't have its own notice, use the Leaving Employment form at the end of this guide to give your Payroll/Human Resources representative information to:

- Process your final paycheck and W-2 form
- Enter your status change in the payroll system (Benefits, Payroll and Retirement Operations uses
 information from the payroll system to report your status change to the Washington State Department of
 Retirement Systems (DRS) and T. Rowe Price, King County's Deferred Compensation Plan administrator)
- Submit a retirement service award request form (if you're retiring, you receive a commemorative plaque and personal letter from the King County Executive).

Contact your Human Resources or Payroll representative well in advance of retirement to make sure you are following your department's procedures for submitting any DRS information, such as your letter from DRS confirming your retirement benefit, along with your Leaving Employment form (see Section 11: State Retirement System for more information on retirement).

After Benefits, Payroll and Retirement Operations reports your status change to DRS and T. Rowe Price, you can contact them directly about your retirement contributions.

It can take several months after giving notice to make final arrangements for health coverage, your retirement pension, and Deferred Compensation funds. To speed the process along, check with your Payroll representative to make sure your status change is entered in the Payroll system as quickly as possible.

>	Tasks	Submit a Leaving Employment form to your supervisor at least two weeks before leaving. If your Human Resources unit doesn't have its own form for this purpose, use the <u>Leaving</u> <u>Employment Form</u> at the end of this guide. Provide copies of the notice to your supervisor, you Payroll/Human Resources representative, and to Benefits, Payroll and Retirement Operations.
		Check with your Payroll/Human Resources representative after giving notice to make sure your status change has been entered in the payroll system and, if you're retiring, a retirement service award request form has been submitted.
		If you're a represented employee, check with your union to see if there are any union-related tasks to complete.

Section 2: Bus pass/ID/keycard and other property

Prior to your departure, please work with your supervisor to return all King County equipment and property, including your employee bus pass/ID/keycard. Also, use the <u>Records Management Exiting Employee Checklist</u> to review and manage records. If you retire from the Department of Transportation's Transit Division, you may be eligible for a retiree bus pass, depending on your union agreement.

► Tasks		special If you'r DRS sto 10: Sta	equipment, etc.) e e a retiring transit atement and the D	to your supe t employee o DRS letter co em). For mo	eycard and other King rvisor by your last do and are eligible, apply nfirming receipt of your re information, conto	y of employment. I for a retiree bus pour application to re	pass using your last etire (see Section
Section	3:	Fina	al payched	k and	W-2 form		
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► Tasks			nts to make other	payment pr	vings or loans taken j ovisions 30 days befo	ore leaving.	c, contact the
		•	Harborstone Cre Qualstar Credit U		<u>harborstone.com</u> <u>qualstarcu.com</u>	800-523-3641 800-848-0018	
		copies retire (of your last DRS st	tatement an ate retireme	to cash out your leav d the DRS letter conf nt system). For more	irming receipt of yo	our application to

Your Leaving Employment form lets you specify how you want your final paycheck and W-2

you move after submitting the Leaving Employment form, be sure to provide your

Payroll/Human Resources representative an updated mailing address.

form processed and where your COBRA/retiree medical benefits information should be sent. If

Section 4: COBRA

► Eligibility

If you have King County health coverage on your last day of employment, your coverage continues through the last day of the month in which you leave King County employment. When King County-paid coverage ends, you and your covered dependents can pay to continue coverage under COBRA (Consolidated Omnibus Budget Reconciliation Act) as long as your employment ends for reasons other than gross misconduct. Retiring employees can choose to continue coverage under the Retiree Medical Plan as an alternative to COBRA (see Section 5: Retiree Medical Benefits).

In general, you may continue health coverage under COBRA for up to 18 months. However, if you retire because of a disability, as determined by the Social Security Administration, you may be eligible to continue coverage for up to 29 months.

After your department enters your separation from King County into the payroll system, Navia Benefit Solutions contacts you regarding your COBRA options. You have 60 days after your King County coverage ends or 60 days from the date of Navia Benefit Solutions' letter notifying you of your options—whichever is later—to make your COBRA elections. If you elect COBRA continuation coverage, you must make the initial payment within 45 days of electing it.

There is no lapse in coverage – self-paid benefits begin when King County-paid benefits end, even if retroactive processing and payments are required. To expedite your eligibility for coverage, you can enclose your initial payment with your enrollment form.

► Plan options

Your enrollment options are explained in the COBRA enrollment packet you receive from Navia Benefit Solutions. You can opt to continue your enrollment in any health plan (medical, dental and/or vision) and the Health Care Flexible Spending Account (FSA) you were enrolled in on your last day of employment. For example, if you were only enrolled in dental and vision coverage on your last day, you may not choose to continue medical.

If you choose to participate in COBRA, you are not required to continue all the health plans you had on your last day of employment. For example, you may have had medical, dental, and vision coverage as a benefit-eligible employee, but you can elect to continue medical only, dental only, vision only, or any combination of these plans when you enroll in COBRA.

If you choose to continue your participation in a Health Care FSA, you must do so with after-tax dollars. However, you may continue Health Care FSA participation under COBRA without electing medical, dental, and/or vision coverage under COBRA. The advantage of continuing participation under COBRA with after-tax dollars is to avoid forfeiting unused pre-tax contributions. The disadvantage is that you don't benefit from the tax-savings advantage of the plan. You may only extend your participation in a Health Care FSA until the end of the plan year; you are not allowed to re-enroll or carry unused funds into the following year.

After you're enrolled in COBRA, you may discontinue your coverage at any time. You may change plans when you elect COBRA, during an Open Enrollment period, after a qualifying life event, or if you relocate out of your current plan's coverage area and coverage is available in your new location under a different King County plan.

If you elect COBRA between an Open Enrollment period and the following January, Navia Benefit Solutions provides you with Open Enrollment information and the opportunity to change medical plans, effective January 1. As long as you remain on COBRA, you receive Open Enrollment materials and have the opportunity to change medical plans each year.

▶ Dependent coverage options

You may continue covering the same eligible dependents covered on the last day of your employment, or you may discontinue coverage for them anytime. You may add new eligible dependents for coverage if you contact Navia Benefit Solutions within 30 days of one of the following qualifying events:

- Marriage or establishment of a domestic partnership
- Significant change in your spouse/domestic partner's coverage through his/her employment
- Birth or placement for adoption of a child (you have up to 60 days to contact Navia Benefit Solutions when adding a newborn)
- Placement of a legal ward (i.e., a child placed with you as a legal guardian, or a child named in a Qualified Medical Child Support Order, as defined under Federal law and authorized by the plan)

Eligible dependents covered on your last day of employment have their own COBRA rights if they lose coverage through you. However, eligible dependents added after you elect COBRA coverage don't have separate COBRA rights, unless they are newborns or newly-adopted children.

► When coverage ends

COBRA coverage ends on the last day of the month when you or your eligible dependent:

- o Fail to make the required payments within 30 days of the due date
- Become covered under another group medical plan after electing COBRA (unless the plan limits or excludes coverage for a preexisting condition of the individual continuing coverage)
- o Become entitled to Medicare benefits after electing COBRA
- o Reach the end of your maximum COBRA coverage period, or
- o Is no longer disabled, as determined by the Social Security Administration, and have exhausted the designated months of COBRA coverage

COBRA coverage ends on the day:

- o The plan terminates, or
- You or your eligible dependent dies. If you die, your covered dependents may extend coverage up to 36 months from the date COBRA coverage began.
- ► **Tasks** ☐ Navia Benefit Solutions contacts you regarding COBRA options within 30 days of your last day.

Section 5: Retiree medical benefits

► Eligibility

If you have King County medical coverage on your last day of employment, your coverage continues through the last day of the month in which you leave King County employment. When King County-paid coverage ends and you begin drawing a retirement pension, you and your covered dependents can pay to continue coverage under the Retiree Medical Plan if you meet **all** of the following qualifications:

- You have King County health benefits on your last day of employment.
- You are not entitled to Medicare.
- You are not covered under another group medical plan.
- You meet the requirements for formal service or disability retirement under the Washington State
 Public Employees Retirement Act or Seattle City Employees' Retirement System (applies only if you elected to remain under the City of Seattle system by formal agreement between King County and City).

Please note: Five years of cumulative King County service is required to officially retire from King County but is not required to access the Retiree Medical Plan.

Retiree medical benefits are an alternative to COBRA. If you elect Retiree Medical, you waive your COBRA medical rights. You can enroll in any combination of coverage under COBRA and Retiree benefits, e.g., you could elect COBRA medical, Retiree dental, and Retiree vision. Enrollment and length of coverage rules apply to each plan. When choosing coverage, consider the differences between Retiree Medical and COBRA benefits, shown below:

	COBRA benefits	Retiree Medical benefits
Health coverage available	Medical, dental, and vision	Medical and vision
Length of time coverage available	18 months maximum (29 months if you leave employment due to a Social Security-verified disability)	Until you become entitled to Medicare
Plan choice	Allows you to change medical plans at the time of retirement, after a qualifying life event, and during any Open Enrollment period following retirement	Allows you to change medical plans at the time of retirement, after a qualifying life event, and during any Open Enrollment period following retirement
Can you change medical plans between Open Enrollments?	Yes. If you relocate out of your current plan's coverage area and notify Navia Benefit Solutions with proof of your new permanent address and the availability of coverage under another King County plan in your new location	Yes. If you relocate out of your current plan's coverage area and notify Navia Benefit Solutions with proof of your new permanent address and the availability of coverage under another King County plan in your new location
Can you cover dependents?	Yes. You may continue coverage for your dependents under your COBRA benefits. You may choose to enroll them under your COBRA benefits, or you may leave it to them to enroll. Because they have separate enrollment rights under COBRA, they may enroll themselves without action on your part.	Yes. You may continue coverage for your dependents under Retiree Medical. You must take action to enroll them because they do not have the separate enrollment rights they have under COBRA.

► Plan options

Your enrollment options will be explained in the Retiree Medical enrollment packet you receive from Navia Benefit Solutions. You may opt to continue your enrollment in the medical and vision plans and the Health Care Flexible Spending Account (FSA) you were enrolled in on your last day of employment. For example, if you were only enrolled in vision coverage on your last day, you may not choose to continue medical.

You may purchase retiree dental coverage as a separate plan at the time you make your retiree medical elections. For more information, see Section 6: Retiree Dental Benefits.

If you choose to participate in Retiree Medical, you do not have to continue all of the health plans you had on your last day. For example, you may have had medical and vision coverage as a benefit-eligible employee, but you can elect to continue medical only, vision only, or both of the plans.

You must enroll in retiree benefits within 60 days of your King County coverage ending or your notification of retiree options by Navia Benefit Solutions—whichever is later. If you do not elect a medical or vision plan during that time, you may not add it later, not even during Open Enrollment. As long as you remain on Retiree Medical, you receive Open Enrollment materials and have the opportunity to change medical plans each year.

▶ Dependent coverage options

If you elect Retiree Medical for you and your eligible dependents and you die, divorce, or terminate a domestic partnership, or a dependent child loses dependent status, the eligible dependents who lose coverage because of the event may pay to continue their retiree medical benefits under COBRA for up to 36 months.

► When coverage ends

If you retire and elect Retiree Medical for you and your eligible dependents before you become entitled to Medicare, the Retiree Medical ends for everyone when you become Medicare entitled. When this occurs, your qualified dependents have the option to continue their benefit coverage under COBRA for up to 36 months.

If you retire when or after you become entitled to Medicare, you and your dependents are not eligible for Retiree Medical, but your qualified dependents may continue benefit coverage under the provisions of COBRA for up to 36 months from the date of your Medicare entitlement.

>	Tasks	Navia Benefit Solutions contacts you regarding Retiree Medical within 30 days after you retire.
		For other retirement insurance information, go to the Statewide Health Insurance Benefits
		Advisors (SHIBA) Web site at insurance.wa.gov/statewide-health-insurance-benefits-advisors-
		<u>shiba</u> or call 800-562-6900.

Section 6: Retiree dental benefits

If you have King County dental coverage on your last day of employment, your coverage continues through the last day of the month in which you leave King County. When King County-paid coverage ends and you begin drawing a retirement pension, you can purchase the Retiree Dental plan through Delta Dental, provided you do not elect COBRA benefits. You can only elect Retiree Dental when first eligible—you cannot opt in later. The Retiree Dental plan is different than the employee dental plan. You may seek dental care from any Delta Dental network dentist. Unlike Retiree Medical, you can enroll in and continue your Retiree Dental plan if you are entitled to Medicare, up to age 99.

Summary of Retiree Dental Benefits				
	Payment Levels			
Services	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Nonparticipating Dentist	
Class I – Diagnostic & Preventive: Exams, Prophys, X-rays, Fluoride and Sealants	100%	80%	80%	
Class II – Restorative: Restorations, Endodontics, Periodontics, Oral Surgery	80%	70%	70%	
Class III – Major: Crowns, Dentures, Partials, Bridges and Implants	50%	40%	40%	
Annual Maximum Per Person Benefit Period Jan. 1 – Dec. 31	\$2,000	\$2,000	\$2,000	
Deductible (waived on Class 1) Per person/per benefit period Annual family maximum	\$25 \$75	\$25 \$75	\$25 \$75	
TMJ — Surgical and Nonsurgical Lifetime maximum	50% \$500	50% \$500	50% \$500	

Whether you choose a Delta Dental Premier dentist or a Delta Dental PPO dentist, your benefit levels remain the same. However, the Delta Dental PPO dentists have agreed to fees that are, on average, 17% lower than Delta Dental Premier dentist fees. This means that your out-of-pocket costs may be lower when you select a Delta Dental PPO dentist.

► Tasks ☐ Navia Benefit Solutions contacts you regarding retiree dental within 30 days after you retire.

Section 7: COBRA, retiree medical, and retiree dental costs

The monthly cost for COBRA and Retiree Medical benefits is based on what King County pays to provide the same coverage to active employees. Premiums for last year are also shown for comparison. The rates are subject to periodic adjustment. The rates for Retiree Dental are determined by Delta Dental of Washington.

► Regular employee benefit group rates

COBRA/Retiree Medical Pla	ın Rates: Regular Employees	
Plan	2024 Monthly Rates	2025 Monthly Rates
KingCare (Regence)	, , , , , , , , , , , , , , , , , , , ,	,
– Employee	\$955.61	\$1,025.29
– Spouse	\$955.61	\$1,025.29
- Child	\$764.49	\$820.23
– Children	\$1,720.10	\$1,845.53
– Employee + Spouse	\$1,911.21	\$2,050.59
Employee + Child(ren)	\$1,720.10	\$1,845.53
- Family	\$2,675.70	\$2,870.82
KingCare Select (Regence) Not available to TEA employees	, , , , ,	. , , , , , , , , , , , , , , , , , , ,
– Employee	\$884.09	\$946.99
- Spouse	\$884.09	\$946.99
- Child	\$707.27	\$757.59
– Children	\$1,591.35	\$1,704.58
– Employee + Spouse	\$1,768.17	\$1,893.98
- Employee + Child(ren)	\$1,591.35	\$1,704.58
- Family	\$2,475.44	\$2,651.57
SmartCare (Kaiser)	7-7	+ -/
– Employee	\$724.23	\$808.04
- Spouse	\$724.23	\$808.04
- Child	\$579.38	\$646.44
– Children	\$1,303.61	\$1,454.48
– Employee + Spouse	\$1,448.46	\$1,616.09
- Employee + Child(ren)	\$1,303.61	\$1,454.48
- Family	\$2,027.84	\$2,262.52
Delta Dental of Washington (COBRA)	\$2,027.84	\$2,202.32
– Employee	\$72.92	\$75.20
– Spouse	\$72.92	\$75.20
- Child	\$58.33	\$60.16
- Children	\$131.25	\$135.36
- Employee + Spouse	\$145.84	\$150.41
- Employee + Spouse - Employee + Child(ren)	\$131.25	\$135.36
- Employee + Child(ren) - Family	\$204.17	\$135.50
Delta Dental of Washington (Retiree)	3204.17	3210.37
- Retiree	\$76.42	\$76.42
- Employee + Spouse	\$152.84	\$152.48
- Employee + Spouse - Employee + Child(ren)	\$132.84	\$132.46
- Employee + Child(Tell) - Family	\$224.24	\$224.24
Cigna Dental HMO (COBRA) Not available to retirees	3224.24	\$224.24
· · · · · · · · · · · · · · · · · · ·	¢21 12	\$21.12
– Employee	\$21.13 \$19.07	\$21.13 \$19.07
SpouseChild	\$19.07	\$19.07 \$22.44
– Child – Children		
	\$43.57	\$43.57
- Employee + Spouse	\$40.21	\$40.21
– Employee + Child(ren)	\$43.57	\$43.57
- Family	\$68.56	\$68.56
Vision Service Plan	644.50	644.55
– Employee	\$11.59	\$11.55
- Spouse	\$11.59	\$11.55
- Child	\$9.27	\$9.24
- Children	\$20.86	\$20.79
- Employee + Spouse	\$23.17	\$23.09
Employee + Child(ren)	\$20.86	\$20.79
Family	\$32.45	\$32.33

► Transit ATU 587 employee benefit group rates

COBRA Rates & Subsidized Retiree Rates		
Plan	2024 Monthly Rates	2025 Monthly Rates
KingCare (Regence)	2024 Worthly Races	2023 Monthly Rates
– Employee	\$982.96	\$953.48
- Spouse	\$982.96	\$953.48
- Child	\$786.37	\$762.78
- Child - Children	\$1,769.33	\$1,716.25
– Employee + Spouse	\$1,965.93	\$1,906.95
- Employee + Child(ren)	\$1,769.33	\$1,716.25
- Family	\$2,752.30	\$2,669.73
KingCare Select (Regence)	<i>\$2,732.30</i>	Ψ2,003.73
- Employee	\$919.03	\$906.88
- Spouse	\$919.03	\$906.88
- Child	\$735.23	\$725.51
– Children	\$1,654.26	\$1,632.39
– Employee + Spouse	\$1,838.06	\$1,813.76
- Employee + Child(ren)	\$1,654.26	\$1,632.39
- Family	\$2,573.29	\$2,539.27
SmartCare (Kaiser)	¥2,676.25	+ 1,000.1.
- Employee	\$732.16	\$762.24
- Spouse	\$732.16	\$762.24
- Child	\$585.72	\$609.79
– Children	\$1,317.88	\$1,372.02
- Employee + Spouse	\$1,464.31	\$1,572.02
- Employee + Child(ren)	\$1,317.88	\$1,372.02
- Family	\$2,050.04	\$2,050.04
Delta Dental of Washington (COBRA)	¥2,030.04	72,030.04
	\$73.38	\$76.65
- Employee	\$73.38	\$76.65 \$76.65
- Spouse		
- Child) - Children	\$58.70 \$132.08	\$61.32
	\$132.06	\$137.98 \$153.31
- Employee + Spouse	·	
- Employee + Child(ren)	\$132.08	\$137.98 \$214.63
 Family Cigna Dental HMO (COBRA) Not available to retirees 	\$205.46	\$214.05
- Employee	\$21.13	\$21.13
- Spouse	\$19.07	\$19.07
– Spouse – Child	\$19.07	\$22.44
- Child - Children	\$43.57	\$22.44 \$43.57
	\$40.21	\$40.21
Employee + SpouseEmployee + Child(ren)	\$40.21	\$40.21 \$43.57
	\$68.56	
- Family	\$06.30	\$68.56
Delta Dental of Washington (<u>Retiree</u>) — Retiree	\$76.42	\$76.42
- Retiree - Employee + Spouse	\$152.84	\$76.42 \$152.84
	·	
Employee + Child(ren)Family	\$147.82 \$224.24	\$147.82 \$224.24
Vision Service Plan	Ş224.24	Ş 224.2 4
- Employee	\$11.53	\$11.34
– Spouse	\$11.53	\$11.34
– Spouse – Child	\$9.22	\$9.08
- Child - Children	\$9.22	\$20.42
- Employee + Spouse	\$23.05	\$22.68
- Employee + Child(ren)	\$20.75	\$20.42
– Family	\$32.27	\$31.76

► Deputy Sheriff employee benefit group rates (KCPOG and PSPMA members)

COBRA/Retiree Medic	cal Plan Rates: Deputy Sheriff Employees	
Plan	2024 Monthly Rates	2025 Monthly Rates
KingCare (Regence)		
– Employee	\$839.53	\$884.38
– Spouse	\$839.53	\$884.38
– Child	\$671.63	\$707.50
Children	\$1,511.16	\$1,591.88
 Employee + Spouse 	\$1,679.06	\$1,768.76
Employee + Child(ren)	\$1,511.16	\$1,591.88
- Family	\$2,350.69	\$2,476.26
KingCare Select (Regence)	ψ2,000.00	Ŷ Ĺ) 1, 0.20
– Employee	\$782.49	\$817.93
- Spouse	\$782.49	\$817.93
– Child	\$625.99	\$654.34
– Children	\$1,408.49	\$1,472.27
– Employee + Spouse	\$1,564.99	\$1,635.86
- Employee + Child(ren)	\$1,408.49	\$1,472.27
- Family	\$2,190.98	\$2,290.20
SmartCare (Kaiser)	\$2,130.38	72,230.20
- Employee	\$738.70	\$791.04
– Spouse	\$738.70	\$791.04
- Child	\$590.97	\$632.82
– Children	\$1,329.67	\$1,423.87
- Employee + Spouse	\$1,329.07	
	\$1,477.41	\$1,582.08
- Employee + Child(ren)	\$2,068.38	\$1,423.87
- Family	\$2,008.38	\$2,214.91
Delta Dental of Washington (COBRA)	Ć70.20	¢74.20
– Employee	\$70.30	\$71.39
– Spouse	\$70.30	\$71.39
- Child	\$56.24	\$57.11
– Children	\$126.54	\$128.50
– Employee + Spouse	\$140.60	\$142.78
Employee + Child(ren)	\$126.54	\$128.50
– Family	\$196.84	\$199.89
Vision Service Plan		
– Employee	\$9.79	\$9.45
– Spouse	\$9.79	\$9.45
- Child	\$7.83	\$7.56
– Children	\$17.63	\$17.00
Employee + Spouse	\$19.58	\$18.89
Employee + Child(ren)	\$17.63	\$17.00
– Family	\$27.42	\$26.45
Delta Dental of Washington (Retiree)		
– Retiree	\$76.42	\$76.42
– Employee + Spouse	\$152.84	\$152.84
Employee + Child(ren)	\$147.82	\$147.82
– Family	\$224.24	\$224.24

► TEA-DOT employee benefit group rates

COBRA/Retiree Medical Rates: TEA Employees		
Plan	2024 Monthly Rates	2025 Monthly Rates
KingCare (Regence)		
– Employee	\$933.63	\$904.62
– Spouse	\$933.63	\$904.62
- Child	\$746.91	\$723.69
– Children	\$1,680.53	\$1,628.31
– Employee + Spouse	\$1,867.25	\$1,809.22
– Employee + Child(ren)	\$1,680.53	\$1,628.31
- Family	\$2,614.16	\$2,532.93
SmartCare (Kaiser)		
– Employee	\$791.90	\$882.32
– Spouse	\$791.90	\$882.32
- Child	\$633.52	\$705.86
– Children	\$1,425.42	\$1,588.18
– Employee + Spouse	\$1,583.79	\$1,764.64
– Employee + Child(ren)	\$1,425.42	\$1,588.18
- Family	\$2,217.32	\$2,470.50
Delta Dental of Washington (COBRA)		
– Employee	\$76.59	\$79.45
– Spouse	\$76.59	\$79.45
- Child	\$61.27	\$63.56
– Children	\$137.86	\$143.00
– Employee + Spouse	\$153.18	\$158.90
Employee + Child(ren)	\$137.86	\$143.00
– Family	\$214.46	\$222.45
Vision Service Plan		
– Employee	\$12.47	\$12.43
– Spouse	\$12.47	\$12.43
- Child	\$9.98	\$9.95
– Children	\$22.45	\$22.38
– Employee + Spouse	\$24.95	\$24.87
Employee + Child(ren)	\$22.45	\$22.38
– Family	\$34.92	\$34.81
Delta Dental of Washington (Retiree)		
– Retiree	\$76.42	\$76.42
– Retiree + Spouse	\$152.84	\$152.84
Retiree + Child(ren)	\$147.82	\$147.82
- Family	\$224.24	\$224.24

► Qualifying for Retiree Medical

To qualify for Retiree Medical, you must retire from King County. Retirement is defined as:

"Retiring as a result of length of service, which means an employee is eligible, applies for, and begins drawing a pension benefit from LEOFF, PERS Defined Benefit Plan, PSERS or the Seattle City Employees' Retirement System (for County employees who were formally grandfathered with continued participation in that plan) immediately upon terminating from County employment."

K.C.C. 3.12.320 states that "retirement from County employment shall be in accordance with the provisions set forth in State law RCW 41.40.010(24)," which defines retirement as "withdrawal from active service with a retirement allowance as provided in this chapter." The Code and statutory definition of retirement confirms that the intended interpretation of "retire" in K.C.C. 3.12.220(F) is to ensure that retirement at King County is only valid when drawing a retirement benefit from the retirement plans listed above.

Withdrawing funds from any of the following plans *does not* constitute an official retirement: The King County Deferred Compensation Plan, PERS 1, PERS 2, PERS 3 without drawing from the PERS defined benefit, LEOFF, PSERS or the Seattle City Employees' Retirement System.

If you do not officially retire from King County according to the State and County codes, you may **not** cash out your sick leave accruals or participate in the HRA VEBA program, but you can elect Retiree Medical coverage.

Section 8: Life and Disability insurance

If you have life, accidental death and dismemberment (AD&D), or long-term disability (LTD) insurance when you retire, coverage continues through the last day of the month you leave.

When you end employment with King County and you are not ill or injured and away from work on the date your coverage ends, you may continue the basic and supplemental group term life insurance that you had on your last day of employment up to \$500,000. This is called "portability." You pay premiums for the continued coverage directly to Minnesota Life, an affiliate of the Securian Financial Group, and the age-specific group rates may differ from the rates paid by active employees. If you continue coverage, you may also continue the supplemental group term life insurance you had on your last day of employment for your spouse/domestic partner until he/she is age 99 up to \$100,000 and your dependent children until they are age 19 (25 if solely dependent on you for support) up to \$5,000.

Life and AD&D insurance may also be converted to individual policies. To convert life or AD&D to individual policies, you must contact the plans and apply within 31 days of when your King County coverage ends. LTD coverage is not eligible for conversion.

- ► **Task** ☐ If you wish to convert from group to individual policies, call and apply within 31 days of when your group coverage ends.
 - Life (Minnesota Life/Securian) 866-293-6047
 - AD&D (Minnesota Life/Securian) 866-293-6047

Section 9: Flexible Spending Accounts

▶ Flexible Spending Accounts

Your participation in your FSAs ends on your last day of King County employment. You have 90 days following your last day to submit reimbursement requests for eligible expenses incurred through the date you leave.

You can elect to continue participation in the Health Care FSA under COBRA. Under COBRA, contributions are made on an after-tax basis plus a 2% administration fee. You have until March 31 of the following year to submit reimbursement requests for eligible expenses incurred during the calendar year while under COBRA. However, you cannot re-enroll or carry unused funds into the following year. As a reminder, FSA funds cannot be used to pay health care premiums.

Note: Dependent Day Care FSAs cannot be continued after you retire from King County.

Section 10: State retirement system

► If you are planning to retire

If you are planning to retire, contact DRS six months before you leave. This allows DRS time to send you information about retirement options and to process the option you choose as soon as possible after you leave.

Ask DRS for:

- An estimate of your retirement benefits
- A retirement packet

After you submit your application for retirement, DRS sends you a letter confirming its receipt. Then, shortly before you retire, DRS sends you another letter confirming your retirement benefit. You will need to submit a copy of your letter from DRS confirming your retirement benefit along with your Leaving Employment form when you inform your department of your retirement date (see "Section 1: Letting Key Staff Know Your Leaving" for more information about the Leaving Employment form at the end of this guide).

If you're a Transit employee, you'll need copies of your estimate of retirement benefits (or last DRS statement) and the DRS letter confirming receipt of your application to retire to apply for a retiree bus pass and to cash out unused leave.

► Selecting your retirement date

When deciding on your retirement date, it is important to understand when DRS considers you to be retired.

For the majority of State retirement plans (PERS 1, PERS 2, PERS 3, PSERS 2 and LEOFF 2), you need to terminate your employment with King County on a date before the first of the month in which you want to begin accruing your pension benefit, which is your defined benefit amount. You receive your first pension check on the last working day of the month in which you retire.



If you receive any compensation from King County in the month you want to begin retirement, your pension benefits will not begin accruing until the first of the following month. In other words, you cannot receive any King County pay or other King County-paid benefits in the same month you receive a pension check.

For example, you decide to take a vacation day or you work on the first of the month you want to retire. Because you will be paid for that day and receive King County-paid health benefits for that month, you won't be able to begin accruing pension benefits until the first of the following month.



Cost of living adjustments

For the majority of State retirement plans (PERS 2, PERS 3, PSERS 2 and LEOFF 2), you may receive a cost of living adjustment (COLA) of up to 3% of your base pension amount. It is added to your base pension amount in July each year, provided you have been retired for one full calendar year. If you retire in the first half of the year, you receive your first COLA in July of the following calendar year. If you retire later in the year, your first COLA is delayed by another calendar year.

•	Tasks 🗌	Contact DRS six months before you retire at 800-547-6657 or recep@drs.wa.gov. For more
		information, go to <u>drs.wa.gov</u> .
		If you're a member of the Seattle City Employees' Retirement System, call 206-386-1292.

Section 11: Working after retirement

You may retire from King County and go to work for a private employer or a public employer not covered by a Washington State Department of Retirement Systems (DRS) pension plan without affecting your State retirement system pension. However, if you retire from King County and return to work for King County or any public employer covered by a DRS pension plan:

- Under no circumstances may you plan (either verbally or in writing) post-retirement employment with King County before you retire, and
- You're limited in terms of when you may return to work and the total hours per year you may work before your pension is affected.

In 2007, the State legislature established new return-to-work rules for PERS 2 and PERS 3 members who retire with 30 or more years of service credit. For more information on these new rules, go to drs.wa.gov/publications/member/multisystem/p23returntowork.htm.

► **Task** ☐ If you plan to return to work after you retire, contact DRS at 800-547-6657 or e-mail recep@drs.wa.gov before you return to work. For more information, go to <u>drs.wa.gov</u>.

Section 12: Health Reimbursement Arrangement in a Voluntary Employees' Beneficiary Association (HRA VEBA)

A Health Reimbursement Arrangement (HRA) in a Voluntary Employees' Beneficiary Association (VEBA) provides a tax-free rollover of leave cash-outs to an HRA VEBA Trust at retirement. These funds are used to pay or reimburse you for eligible out-of-pocket health care expenses and premiums for you, your spouse and your qualified dependents (health care expenses and premiums for domestic partners and their children are not eligible).

To qualify, you must retire from a group that voted to participate in HRA VEBA. IRS rules require employees to decide in groups (represented or non-represented) and there is no individual choice. If you retire from a group that voted to participate in either or both of the HRA VEBA options, you will automatically be enrolled in your HRA VEBA Trust shortly after you retire. Depending on your group's decision, you'll receive one or both of these cash-outs in your HRA VEBA:

- 35% of your unused accrued sick leave time
- 50% of your unused accrued vacation time, up to 480 hours if you work a 40-hour week or up to 420 hours if you work a 35-hour week. (The other 50% is paid to you as regular taxable wages.)
- To see HRA VEBA voting results, go to <u>HRA VEBA Groups</u>.

▶ What to expect after you retire

- Represented and non-represented employee voting results can be found on the <u>HRA VEBA webpage</u>.
- You will be auto-enrolled in an HRA VEBA Trust.
- Gallagher VEBA will send an enrollment confirmation to you by email or regular mail. You can register online, update your profile, and check your investment allocation at hraveba.org.
- Your HRA VEBA contributions will be sent to Gallagher 30-45 days after you're enrolled. You can begin
 using your account for reimbursement of eligible out-of-pocket health care expenses and premiums.
- For additional information, go to hraveba.org or call 888-659-8828.

Section 13: Deferred Compensation Plan

T. Rowe Price, King County's Deferred Compensation Plan administrator, will be notified when you retire. You may keep your funds in the King County plan or you may transfer them to another plan. If you elect to withdraw your funds and your balance is less than \$5,000, you will receive a lump-sum payment of your account balance. Use the Deferred Compensation Plan Leave Contribution Form at the end of this guide.

You can use your Deferred Compensation Plan contributions to purchase additional service credits from the Department of Retirement Systems. Contact kcdeferredcomp@kingcounty.gov for details.

To avoid supplemental taxes, you can transfer your sick and vacation leave cash outs to a Deferred Compensation Plan account, as long as you are not part of a VEBA retiree group. You can make a one-time contribution, even if you don't currently participate in the Deferred Compensation Plan.

For more information, call the King County Deferred Compensation Coordinator at 206-263-9250 or go to kingcounty.gov/en/legacy/audience/employees/benefits/retirement/deferred-compensation.aspx.

>	Task	When you're retiring from King County, be sure to contact T. Rowe Price about your Deferred
		Compensation Plan options at 888-457-5770 or rps.troweprice.com/kingcounty.

Section 14: Ethics provisions for post-employment

The King County Code of Ethics (K.C.C. 3.04.035) includes provisions to ensure the highest level of ethical conduct in all King County transactions after you retire. The provisions are summarized below. If you're uncertain whether or not the provisions apply to you or if you have any other questions, contact the King County Board of Ethics.

For one year after you retire from King County, you:

- May not have a financial or beneficial interest in a contract or grant that was planned, authorized or funded by a King County action in which you participated during your employment
- May not assist a person, whether or not for compensation, in any King County action in which you
 participated during your employment (you're not, however, prohibited from rendering assistance to
 King County employees in the course of employee organization business)
- Must first disclose your past King County employment in writing to the department considering or taking King County action before you participate.

In addition, after you retire from King County, you may not:

- Disclose or use any privileged or proprietary information gained by reason of your former employment for your personal benefit or the personal benefit of a member of your immediate family unless the information is a matter of public knowledge or is available to the public on request
- Assist any person, whether or not for compensation, on matters in which you're personally prohibited from participating.

After you retire from King County, it's okay to render assistance to a person if the assistance is provided without compensation in any form and limited to:

- Providing names, work addresses and work telephone numbers of King County agencies or employees to the extent the information is available as a matter of public record under State law
- Providing free transportation to another for the purpose of conducting business with a King County agency
- Assisting another person in obtaining or completing forms required by a King County agency for the conduct of King County business
- Assisting the poor or infirm, or
- Engaging in conduct that is protected by the constitutions or laws of the Washington or the U.S.

It's also okay to accept future employment with King County at any time, including employment with your former department, and (except as otherwise provided in this section of the Code of Ethics) you may appear before the County or seek a County action on your own behalf to the same extent other persons may appear before or seek actions by King County.

>	Task	If you're uncertain whether or not these post-employment provisions apply to you, contact the
		King County Board of Ethics at 206-263-7821 or e-mail board.ethics@kingcounty.gov. For
		more information, go to <u>kingcounty.gov/ethics</u> .

Section 15: Other things to know and do

► Making Life Easier

The King County Making Life Easier program provides free, confidential assistance for resolving personal life issues to benefit-eligible employees, their dependent family members and anyone living in the employee's household. Services include counseling, financial and legal advice, child care and adult/elder care. For assistance or more information, contact the program 24 hours a day, 7 days a week at 888-874-7290 toll-free.

If you're a benefit-eligible employee retiring from King County, you may continue to use the Making Life Easier program through the end of the month in which you leave. If you continue King County health care benefits under COBRA, you may use the program's services for the period of time you are continuing your coverage under COBRA.

► Social Security

If you leave employment because you have a disability or are 62 or older, contact the Social Security Administration at 800-772-1213 regarding your eligibility for benefits before you leave. For more information, go to ssa.gov.

▶ Medicare

You may be eligible for Medicare benefits, depending on your age and your reason for leaving employment. If you are already eligible, sign up for Medicare three months prior to your retirement date to ensure your benefits are effective by your retirement date. For more information, call 800-MEDICARE or visit medicare.gov/

•

2025 Medical Plan Comparison: Regular Employees

Plan Feature (In-network)	SmartCare (Kaiser)	KingCare Select (Regence & CVS)	KingCare PPO (Regence & CVS)
Provider Choice	A primary care provider coordinates your care through the plan network. You may self-refer to many Kaiser specialists. No coverage for out-of-network care unless approved/referred.	You must choose a primary care provider, who coordinates your care. Referrals are not required. You save the most by staying in-network, but you can go out-of-network for a higher cost.	You may choose any qualified provider, but your out-of-pocket costs are lowest when you use network providers.
Out-of-area coverage	See next page.	See next page.	See next page.
Employee Premium Share	\$0 per month	\$50 per month	\$75 per month
Benefit Access Fee ¹	0\$	\$75	\$200 per month
Deductible ²	Single \$0 Family \$0	Single \$100 Family \$300	Single \$300 Family \$900
Out-of-Pocket Limit ³	Single \$1,000 Family \$2,000	Single \$1,100 Family \$2,400	Single \$1,100 Family \$2,500
Emergency Room Out-of-Pocket Limit	N/A	Single \$6,600 Family \$13,000	Single \$6,600 Family \$12,900
Prescription Out-of- Pocket Limit	Single & Family \$0 Copays apply to out-of-pocket maximum	Single \$1,500 Family \$3,000	Single \$1,500 Family \$3,000
	Your cost—after of	ter deductible-using in-network providers4	
Emergency Room	\$100 copay	15% after \$200 copay Applies to ER OOP limit. Copay waived if admitted.	15% after \$200 copay Applies to ER OOP limit. Copay waived if admitted.
Hospital-Inpatient	\$200 copay	15%	15%
Labs, X-ray, Tests	%0	10%	15%
Mental Health	Outpatient: \$20 copay Inpatient: \$200 copay	Outpatient therapy services: \$20 copay Outpt non-therapy services & inpt services: 10%	15%
Office Visits	\$20 copay	\$20 (no deductible)	15%
Prescription Drugs (retail 30-day supply)	Generic: \$10 copay Preferred brand: \$20 copay Non-preferred brand: \$30 copay	Generic: \$5 copay Preferred brand: \$25 copay Non-preferred brand: \$75 copay	Generic: \$7 copay Preferred brand: \$75 copay Non-preferred brand: \$75 copay
Urgent Care	\$20 copay	\$20 copay	15%
)			

Benefits, Payroll & Retirement Operations 206-684-1556 KC.Benefits@KingCounty.gov



2025 Medical Plan Comparison: Regular Employees **Out-of-Network Coverage**

Plan Feature	SmartCare	KingCare Select	KingCare PPO
(Out-of-network)	(Kaiser)	(Regence & CVS)	(Regence & CVS)
Out-of-Area Coverage	Covered care is available at out-of-area Kaiser Permanente facilities—call Member Services to set up access. No coverage for out-of-network care unless approved/referred. If outside the Kaiser area, urgent and emergency care is covered at any provider.	When seeking care outside your network, covered services are reimbursed at the out-of-network benefit level, which is significantly lower. Emergency care is covered the same anywhere.	Same coverage as when home, through Regence and CVS Caremark® national provider networks. Your out-of-pocket costs are lowest when you use network providers. Emergency care is covered the same anywhere.
Deductible ²	Single \$0	Single \$500	Single \$300
	Family \$0	Family \$1,500	Family \$900
Out-of-Pocket Limit ³	Single \$1,000	Single \$2,500	Single \$1,900
	Family \$2,000	Family \$5,500	Family \$4,100
Emergency Room	\$100 copay	10% after \$200 copay	15% after \$200 copay
What you pay for most covered services ⁴	100% (Plan pays 0%)	40% after deductible & copays, until you reach the out-of-pocket limit. (Plan pays 60%.)	40% after deductible & copays, until you reach the out-of-pocket limit. (Plan pays 60%.)

DISCLAIMER: These charts should be used as a general guide only. For specific plan details, refer to the governing documents at KingCounty gov/Plan-Details.

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- Benefit Access Fee: The cost to add a spouse/state-registered domestic partner who has access to medical coverage through an employer.
 - 2. Deductible: The amount you pay per year before the plan begins to pay.
- 3. Out of pocket limit. The most you could pay per year for your share of the costs of covered services, including the deductible, copays, and coinsurance.
 - 4. All services must be medically necessary. See plan guide for details, limits, restrictions, and preauthorization requirements.



2025 Medical Plan Comparison: Transit ATU 587 Employees

Provider Choice Provider Choice Provide	Plan Feature (In-network)	SmartCare (Kaiser)	KingCare Select (Regence & CVS)	KingCare PPO (Regence & CVS)
Full Benefits employees: \$0 per month Partial Benefits employees: \$0 per month Partial Benefits employees: \$0 per month for employees: \$143.56 per month for employees: \$143.56 per month for employees: \$143.56 per month for employee-only coverage \$0 per month \$0 per month \$0 per month \$100 per per per per per per month \$100 per	Provider Choice	A primary care provider coordinates your care through the plan network. You may self-refer to many Kaiser specialists. No coverage for out-of-network care unless approved/referred.	You must choose a primary care provider, who coordinates your care. Referrals are not required. You save the most by staying in-network, but you can go out-of-network for a higher cost.	You may choose any qualified provider, but your out-of-pocket costs are lowest when you use network providers.
Full Benefits employees: \$0 per month Partial Benefits employees: \$143.56 per month Partial Benefits employees: \$143.56 per month Partial Benefits employees: \$143.56 per month for employee-only coverage \$0 per month \$0 per month \$1,000 Family \$0	Out-of-area coverage		See next page.	See next page.
1 \$0 per month \$75 per month \$200 per month Single \$0 Family \$0 Single \$200 Single \$1,500 Family \$2,000 Family \$600 Family \$1,500 Family \$1,500 Single \$1,000 Single \$1,500 Family \$1,500 Family \$1,500 Single \$1,000 Family \$2,100 Family \$2,100 Family \$1,500 Single \$1,000 Family \$2,100 Family \$1,500 Family \$1,500 Avour cost—after deductible—using in-network providers 10% 15% 15% Avour copay 10% after \$200 copay 15% after \$200 copay 15% 15% Cenaric: \$10 copay Coupatient therapy services & inpt services: 10% 15% 15% Cenaric: \$20 copay Cenaric: \$50 copay Non-preferred brand: 15% Non-preferred brand: \$20 copay Non-preferred brand: \$50 copay 15%	Cost to Employee	Full Benefits employees: \$0 per month Partial Benefits employees: \$143.56 per month for employee-only coverage	Full Benefits employees: \$0 per month Partial Benefits employees: \$326.77 per month for employee-only coverage	Full Benefits employees: \$0 per month Partial Benefits employees: \$389.45 per month for employee-only coverage
Single \$00 Family \$00 Family \$000 Family \$0000 Family \$000 Family \$0000 Family \$000 Family \$000 Family \$000 Family	Benefit Access Fee ¹	\$0 per month	\$75 per month	\$200 per month
single \$1,000 Single \$1,500 Family \$2,100 Family \$2,000 Family \$	Deductible ²	Single \$0 Family \$0		
Single & Family \$0 Single & \$1,500 \$1,500 Single \$1,50 Your cost—after deductible—using in-network providers4 Family \$3,00 Your cost—after deductible—using in-network providers4 10% 15% after \$200 copay \$200 copay 10% 10% 15% Chipatient \$200 copay Outpatient therapy services: \$20 copay 15% Ceneric: \$10 copay Outpatient copay \$20 (no deductible) Secopay \$20 copay T5% Preferred brand: \$20 copay Non-preferred brand: \$25 copay Non-preferred brand: \$20 copay Non-preferred brand: \$55 copay \$20 copay Non-preferred brand: \$55 copay Non-preferred brand:	Out-of-Pocket Limit ³			
Your cost—after deductible—using in-network providers4 \$100 copay 10% after \$200 copay 15% after \$200 copay \$200 copay 10% 15% Outpatient: \$20 copay Inpatient: \$200 copay Inpatient: \$20	Prescription Out-of- Pocket Limit	Single & Family \$0 Copays apply to out of pocket maximum		
\$100 copay 10% after \$200 copay 15% after \$200 copay \$200 copay 10% 15% Outpatient: \$20 copay Outpatient therapy services: \$20 copay 15% Outpatient: \$200 copay Outpt non-therapy services & inpt services: 10% 15% Generic: \$20 copay \$20 copay 15% Generic: Preferred brand: \$20 copay \$20 copay Generic: Preferred brand: Preferred brand: \$75 copay Non-preferred brand: \$20 copay \$20 copay Non-preferred brand: S20 copay \$75 copay Non-preferred brand: \$20 copay \$20 copay \$75 copay		Your cost—after d	eductible—using in-network providers4	
\$200 copay 10% 15% Outpatient: \$20 copay Inpatient: \$20 copay Inpatient: \$20 copay Outpatient therapy services: \$20 copay Outpt non-therapy services & inpt services: 10% 15% Generic: Preferred brand: \$20 copay Non-preferred brand: \$20 copay \$20 copay Non-preferred brand: \$75 copay Non-preferred brand: \$75 copay Generic: Preferred brand: Non-preferred brand: Non-preferred brand: Non-preferred brand: 15%	Emergency Room	\$100 copay	10% after \$200 copay	15% after \$200 copay
Outpatient: \$20 copay Outpatient therapy services: \$20 copay 15% Coutpatient: \$200 copay Outpt non-therapy services: \$20 copay 15% Generic: Preferred brand: \$20 copay \$20 copay Generic: Preferred brand: \$20 copay Non-preferred brand: \$20 copay Non-preferred brand: \$75 copay Non-preferred brand: Non-preferred brand: \$75 copay \$20 copay \$20 copay Non-preferred brand: \$75 copay Non-preferred brand: Non-preferred	Hospital-Inpatient	\$200 copay	10%	15%
Outpatient: \$20 copay Outpatient therapy services: \$20 copay 15% Inpatient: \$200 copay \$20 copay \$20 (no deductible) 15% Generic: Preferred brand: \$20 copay \$10 copay Generic: Preferred brand: \$25 copay Generic: Preferred brand: \$75 copay Non-preferred brand: Non-preferred brand: \$75 copay Non-preferred brand: A15%	Labs, X-ray, Tests	%0	10%	15%
\$20 copay \$20 (no deductible) 15% Generic: \$10 copay Generic: \$5 copay Generic: Preferred brand: \$20 copay Non-preferred brand: \$75 copay Non-preferred brand: \$20 copay \$20 copay \$20 copay Non-preferred brand:	Mental Health	Outpatient: \$20 copay Inpatient: \$200 copay	Outpatient therapy services: \$20 copay Outpt non-therapy services & inpt services: 10%	15%
Generic: \$10 copay Generic: \$5 copay Generic: Preferred brand: \$20 copay Preferred brand: \$25 copay Preferred brand: Non-preferred brand: \$20 copay Non-preferred brand: \$75 copay Non-preferred brand: \$20 copay \$20 copay 15%	Office Visits	\$20 copay	\$20 (no deductible)	15%
\$20 copay \$20 copay	Prescription Drugs (retail 30-day supply)	and:	and:	and:
	Urgent Care	\$20 copay	\$20 copay	15%



2025 Medical Plan Comparison: Transit ATU 587 Employees **Out-of-Network Coverage**

Plan Feature	SmartCare	KingCare Select	KingCare PPO
(Out-of-network)	(Kaiser)	(Regence & CVS)	(Regence & CVS)
Out-of-Area Coverage	Covered care is available at out-of-area Kaiser Permanente facilities—call Member Services to set up access. No coverage for out-of-network care unless approved/referred. If outside the Kaiser area, urgent and emergency care is covered at any provider.	When seeking care outside your network, covered services are reimbursed at the out-of-network benefit level, which is significantly lower. Emergency care is covered the same anywhere.	Same coverage as when home, through Regence and CVS Caremark® national provider networks. Your out-of-pocket costs are lowest when you use network providers. Emergency care is covered the same anywhere.
Deductible ¹	Single \$0	Single \$600	Single \$500
	Family \$0	Family \$1,800	Family \$1,500
Out-of-Pocket Limit ²	Single \$1,000	Single \$3,300	Single \$3,500
	Family \$2,000	Family \$7,100	Family \$7,500
Emergency Room	\$100 copay	10% after \$200 copay	15% after \$200 copay
What you pay for most covered services ⁴	100% (Plan pays 0%)	40% after deductible & copays, until you reach the 40% after deductible & copays, until you reach the out-of-pocket limit. (Plan pays 60%.)	40% after deductible & copays, until you reach the out-of-pocket limit. (Plan pays 60%.)

DISCLAIMER: This chart should be used as a general guide only. For specific plan details, refer to the governing documents at KingCounty gov/Plan-Detail

- 1. Benefit Access Fee: The cost to add a spouse/state-registered domestic partner who has access to medical coverage through an employer
- Deductible: The amount you pay per year before the plan begins to pay.
 Out-of-pocket limit. The most you could pay per year for your share of the costs of covered services, including the deductible, copays, and coinsurance.
 - 4. All services must be medically necessary. See plan guide for details, limits, restrictions, and preauthorization requirements.



2025 Medical Plan Comparison: Deputy Sheriff Employees

Plan Feature (In-network)	SmartCare (Kaiser)	KingCare Select (Regence & CVS)	KingCare PPO (Regence & CVS)
Provider Choice	A primary care provider coordinates your care through the plan network. You may self-refer to many Kaiser specialists. No coverage for out-of-network care unless approved/referred.	You must choose a primary care provider, who coordinates your care. Referrals are not re-quired. You save the most by staying in-network, but you can go out-of-network for a higher cost.	You may choose any qualified provider, but your out-of-pocket costs are lowest when you use network providers.
Out-of-area coverage	See next page.	See next page.	See next page.
Cost to Employee	\$0 per month	\$0 per month	\$0 per month
Benefit Access Fee ¹	\$50	\$75	\$200 per month
Plan Selection Fee ²	0\$	0\$	\$100 per month
Deductible ³	Single: \$0 Family: \$0	Single: \$100 Family: \$300	Single: \$300 Family: \$900
Out-of-Pocket Limit ⁴	Single: \$1,000 Family: \$2,000	Single: \$900 Family: \$1,900	Single: \$1,100 Family: \$2,500
Prescription Out-of- Pocket Limit	Single & Family \$0 Copays apply to out of pocket maximum	Single \$1,500 Family \$3,000	Single \$1,500 Family \$3,000
	Your cost—after	Your cost—after deductible—using in-network providers ⁵	
Emergency Room	\$100 copay	10% after \$200 copay	15% after \$200 copay
Hospital-Inpatient	\$200 copay	10%	15%.
Labs, X-ray, Tests	%0	10%	15%
Mental Health	Outpatient: \$20 copay Inpatient: \$200 copay	Outpatient therapy services: \$20 copay Outpt non-therapy services & inpt services: 10%	15%
Office Visits	\$20 copay	\$20 (no deductible)	15%
Prescription Drugs (retail 30-day supply)	Generic: \$10 copay Preferred brand: \$20 copay Non-preferred brand: \$30 copay	Generic: \$5 copay Preferred brand: \$75 copay Non-preferred brand: \$75 copay	Generic: \$7 copay Preferred brand: \$30 copay Non-preferred brand: \$60 copay
Urgent Care	\$20 copay	\$20 copay	15%



2025 Medical Plan Comparison: Deputy Sheriff Employees **Out-of-Network Coverage**

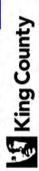
Plan Feature	SmartCare	KingCare Select	KingCare PPO
(Out-of-network)	(Kaiser)	(Regence & CVS)	(Regence & CVS)
Out-of-Area Coverage	Covered care is available at out-of-area Kaiser Permanente facilities—call Member Services to set up access. No coverage for out-of-network care unless approved/referred. If outside the Kaiser area, urgent and emergency care is covered at any provider.	When seeking care outside your network, covered services are reimbursed at the out-of-network benefit level, which is significantly lower. Emergency care is covered the same anywhere.	Same coverage as when home, through Regence and CVS Caremark® national provider networks. Your out-of-pocket costs are lowest when you use network providers. Emergency care is covered the same anywhere.
Deductible ¹	Single \$0	Single \$500	Single \$300
	Family \$0	Family \$1,500	Family \$900
Out-of-Pocket Limit ²	Single \$1,000	Single \$2,500	Single \$1,900
	Family \$2,000	Family \$5,500	Family \$4,100
Emergency Room	\$100 copay	10% after \$200 copay	15% after \$200 copay
What you pay for most covered services ⁵	100% (Plan pays 0%)	40% after deductible & copays, until you reach the out-of-pocket limit. (Plan pays 60%.)	35% after deductible & copays, until you reach the out-of-pocket limit. (Plan pays 65%.)

DISCLAIMER: This chart should be used as a general guide only. For specific plan details, refer to the governing documents at KingCounty gov/Plan-Details

- 1. Benefit Access Fee: The cost to add a spouse/state-registered domestic partner who has access to medical coverage through an employer

- Plan Selection Fee: The cost of the KingCare PPO medical plan, regardless of how many family members you cover.
 Deductible: The amount you pay per year before the plan begins to pay.
 Out-of-pocket limit: The most you could pay per year for your share of the costs of covered services, including the deductible, copays, and coinsurance.
 All services must be medically necessary. See plan guide for details, limits, restrictions, and preauthorization requirements.





2025 Medical Plan Comparison: TEA-DOT Employees

Provider Choice throu throu many netwood out-of-Area Coverage Employee Premium \$40 ps. Share Benefit Access Fee¹ \$75 ps. Deductible² Out-of-Pocket Limit³ Emergency Room Out-	A primary care provider coordinates care through the plan network. You may self-refer to many Kaiser specialists. No coverage for out-of-network care unless approved/referred. See next page. \$40 per month for employee-only coverage	You may choose any qualified provider, but your out-of-pocket costs are lowest when you use network providers. See next page.
Area Coverage yee Premium t Access Fee1 tible2 Pocket Limit3 ency Room Out-	See next page.	See next page.
yee Premium t Access Fee1 tible2 Pocket Limit³ ency Room Out-	per month for employee-only coverage	
Benefit Access Fee¹ Deductible² Out-of-Pocket Limit³ Emergency Room Out-	\$75 per month for employee plus family coverage	\$75 per month for employee-only coverage \$100 per month for employee plus family coverage
Deductible ² Out-of-Pocket Limit ³ Emergency Room Out-	0\$	\$200 per month
Out-of-Pocket Limit ³ Emergency Room Out-	Single: \$0 Family: \$0	Single: \$300 Family: \$900
Emergency Room Out-	Single: \$1,000 Family: \$2,000	Single: \$1,100 Family: \$2,500
of-Pocket Limit	N/A	Single: \$6,600 Family: \$12,900
Prescription Out-of- Pocket Limit	Single & Family \$0 Copays apply to out-of-pocket maximum	Single: \$1,500 Family: \$3,000
Your	Your cost—after deductible—using in-network providers ⁴	stwork providers ⁴
Emergency Room	\$100 copay	15% after \$200 copay Applies to ER OOP limit. Copay waived if admitted.
Hospital inpatient	\$100 copay	15%
Labs, X-ray, Tests	%0	15%
Mental Health	Outpatient: \$20 copay Inpatient: \$200 copay	15%
Office Visits	\$20 copay	15%
Prescription Drugs (retail 30-day supply)	Generic: \$10 copay Preferred brand: \$20 copay Non-preferred brand: \$30 copay	Generic: \$7 copay Preferred brand: \$50 copay Non-preferred brand: \$60 copay
Urgent Care	\$20 copay	15%



2025 Medical Plan Comparison: TEA-DOT Employees **Out-of-Network Coverage**

Plan Feature (Out-of-network)	SmartCare (Kaiser)	KingCare PPO (Regence & CVS)
Out-of-Area Coverage	Covered care is available at out-of-area Kaiser Permanente facilities—call Member Services to set up access. If outside the Kaiser area, urgent and emergency care is covered at any provider.	Same coverage as when home, through Regence and CVS Caremark® national provider networks.
Deductible ²	Single: \$0 Family: \$0	Single: \$300 Family: \$900
Out-of-Pocket Limit ³	Single: \$1,000 Family: \$2,000	Single: \$1,900 Family: \$4,100
Emergency Room	\$100 copay	15% after \$200 copay Applies to ER OOP limit. Copay waived if admitted.
What you pay for most covered services ⁴	100% (Plan pays 0%)	40% after deductible & copays, until you reach the out-of-pocket limit. (Plan pays 65%.)

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DISCLAIMER: These charts should be used as a general guide only. For specific plan details, refer to the governing documents at KingCounty, gov/Plan-Details.

1. Benefit Access Fee: The cost to add a spouse/state-registered domestic partner who has access to medical coverage through an employer.

Deductible: The amount you pay per year before the plan begins to pay

3. Out-of-pocket limit: The most you could pay per year for your share of the costs of covered services, including the deductible, copays, and coinsurance.

4. All services must be medically necessary. See plan guide for details, limits, restrictions, and preauthorization requirements.

Benefits, Payroll & Retirement Operations 206-684-1556 KC. Benefits@KingCounty.gov King County

Contacts & Resources

Benefits Eligibility, Enrollment & Questions	Benefits, Payroll and Retirement Operations The Chinook Building CNK-ES-0230, 401 Fifth Ave., Seattle WA 98104 Phone 206-684-1556 • 800-325-6165 x41556 (outside local calling area) Fax 206-296-7700 E-mail <u>kc.benefits@kingcounty.gov</u> Web <u>kingcounty.gov/benefits</u>
Deferred Compensation Plan	King County Deferred Compensation Plan Phone 206-263-9250 E-mail: <u>kcdeferredcomp@kingcounty.gov</u> T. Rowe Price Phone 888-457-5770 Web: <u>rps.troweprice.com/kingcounty</u>
Dental	Delta Dental of Washington P.O. Box 75983, Seattle WA 98175-0983 Phone 866-229-4102 E-mail cservice@deltadentalwa.com Cigna Dental HMO Phone 800-244-6224 Web cigna.com
COBRA	Navia Benefit Solutions P.O. Box 53250, Bellevue, WA 98015-3250 Phone 425-452-3490 (Monday-Friday, 7 a.m5 p.m.) Email: cobra@naviabenefits.com
Flexible Spending Accounts (FSAs)	Navia Benefit Solutions P.O. Box 53250, Bellevue, WA 98015-3250 Phone 425-452-3500 (Monday-Friday, 5 a.m5 p.m.) Questions: customerservice@naviabenefits.com Claims: claims@naviabenefits.com
HRA VEBA	Gallagher VEBA Phone 888-659-8828 E-mail <u>customercare@hraveba.org</u> Web <u>hraveba.org</u>
Life and Disability (AD&D) Insurance	Minnesota Life Insurance Company (subsidiary of Securian Financial Group) 400 Robert Street North, St. Paul, MN 55101 For conversion/ portability: 866-365-2374 or <u>lifebenefits.com/continue</u> Claims: 888-658-0193 Customer Service: 866-293-6047
Long-term Disability Insurance	The Standard Employee Benefits Department, P.O. Box 2800, Portland, OR 97208 For claims: 844-239-3567 Web standard.com
Medical	KingCare and KingCare Select – Regence BlueShield PO Box 30271, Salt Lake City, UT 84130-0271 Phone 800-376-7926 Web regence.com SmartCare – Kaiser Permanente P.O. Box 34585, Seattle WA 98124-1585 Phone 888-901-4636 E-mail info@ghc.org Web kp.org
Prescriptions	Regence BlueShield Plans – CVS Caremark P.O. Box 52136, Phoenix, AZ 85072-2136 Phone 844-380-8838 Web <u>caremark.com/</u> Kaiser Permanente Phone 800-245-7979 Web <u>kp.org</u>
Retirement	Washington State Department of Retirement Systems 800-547-6657 Web: <u>drs.wa.gov</u> E-mail: <u>recep@drs.wa.gov</u>
Vision	Vision Service Plan P.O. Box 997100, Sacramento CA 95899-7100 Phone 800-877-7195 Web <u>vsp.com</u>

Please call 711 to access the TTY Relay Service.

Leaving Employment



Instructions: If you are leaving King County for any reason, complete and sign this form, or one provided by your department, and submit copies of this form to: ☐ Your HR representative ☐ Your supervisor ☐ Benefits, Payroll and Retirement Operations To ensure delivery of your W-2, make sure your mailing address is correct in PeopleSoft. Last ______ First _____ MI____ PeopleSoft ID______ Dept/Division____ Home Email _____ Home Phone _____ Mailing Address _____ City _____ State ____ ZIP____ Last work day_____ Last day on paid status _____ Note: If your spouse works for King County, contact Benefits, Payroll and Retirement Operations at 206-684-1556 to learn about coverage options after you leave King County employment. If you are leaving King County employment due to a layoff, resignation, or termination, use the Leaving Employment Guide to direct you through the separation process. If you are retiring, also complete this section A. Please check one of the boxes below: ☐ I have not formally applied for retirement, but I will apply before my last day on paid status. □ I have formally applied for retirement. My effective date of retirement is ___ Attach a copy of your email or letter from the Washington State Department of Retirement Systems or the Seattle City Employees' Retirement System acknowledging receipt of your application for retirement.

Acknowledgement and Authorization

The information I've provided is correct and complete. I understand I must return all King County-owned property (bus pass/photo ID/keycard, keys, cell phones, special equipment, etc.) in my possession by my last day at work.

Signature ______ Date _____

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Deferred Compensation Plan LEAVE CONTRIBUTION FORM



If you're retiring from King County or separating for other reasons, you may be eligible to contribute the value of your unused vacation, comp time, and up to 35% of your sick leave balance (only if retiring) to your Deferred Compensation Plan account. Also, if you participate in the Voluntary Separation Program (VSP), you can contribute all or a portion of your VSP payment. By making a pre-tax deferral, you can reduce taxes withheld from your final paycheck and boost your retirement savings.

Keep in mind, the IRS limits the amount you can contribute to retirement plans each calendar year. For details about contribution limits, go to kingcounty.gov/employees/benefits/deferred-comp.aspx.

Important: Some collective bargaining agreements require that leave balances go into an HRA VEBA account. For more information and a list of participating groups, go to kingcounty.gov/audience/employees/benefits/retirement/VEBA.aspx.

Complete, sign, date, and return this form at least two weeks before your last day of work to the address below. Your leave contribution will be processed after your final paycheck.

Return to:		ty Deferred Co eferredcomp@					
Last			First				MI
Employee ID			Last	paid day			
Home Email			Hom	ne Phone			
Retiring at this time?] Yes			□ No			
Age 50 or over?] Yes			□No			
Acknowledgement and	d Authorizati	on					
I acknowledge, attest to, an	nd authorize the	following:					
unit. If the value exce If I am separating fro form of a taxable pay Medicare and Social I authorize King Cour	sick leave balance to my Deferred Compensation Plan account, according to my collective bargaining f the value exceeds the amount I can contribute, the balance will be issued in a final paycheck. In separating from King County for other reasons: I may receive the value of my accrued vacation in the of a taxable paycheck or as a contribution to my Deferred Compensation Plan account. It care and Social Security withholding, and payroll taxes will be withheld at applicable rates. It is orize King County to initiate a one-time contribution to my Deferred Compensation Plan account from cation, sick leave, and/or compensation time balance, as indicated below: Source Deduction Type Deferred Comp. Plan Contribution Amount						
Source	Deduc	ction Type		Deferred C	omp.	Plan Contributio	on Amount
Vacation	☐ Pre-Tax	☐ Post-tax (F	Roth)	☐ Max	or	□ \$	
Sick Leave	☐ Pre-Tax	☐ Post-tax (I	Roth)	☐ Max	or	□\$	
Comp Time	☐ Pre-Tax	☐ Post-tax (F	Roth)	☐ Max	or	□\$	
VSP Payment	☐ Pre-Tax	☐ Post-tax (I	Roth)	☐ Max	or	□\$	
Signature				D	ate		
Office use YTD contribution only	Gross Pay	out	Amount	Contributed	Fina	paycheck PPE	Cashout PPE

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