



220 S 27th St, #B, Tacoma, WA 98402
 Phone: 253-474-1214 ♦ 800-223-2449
 Fax: 253-474-7180
 Email: staff@unitedemployees.org

2021 to 2025 Contribution Rates

ACTIVE MEDICAL	Rate 1/1/2025		Rate 1/1/2024		Rate 1/1/2023		Rate 1/1/2022	Rate 1/1/2021
Composite Rate								
• AV9 Plan	1,125.00	+2%	1,103.00	+2.5%	1,076.00	+2.5%	1,050.00	1,050.00
• AV8 Plan	1,065.00	+2%	1,044.00	+2.5%	1,019.00	+2.5%	994.00	994.00
• A6 Plan	1,048.00	+2%	1,027.00	+2.5%	1,002.00	+2.5%	978.00	978.00
• A5 Plan	1,438.00	+2%	1,410.00	+2.5%	1,376.00	-	1,376.00	1,376.00
Tiered Rate								
• A5 Plan - Employee only	792.00	+2%	776.00	+2.5%	757.00	-	757.00	757.00
• A5 Plan – Emp + Spouse	1,583.00	+2%	1,552.00	+2.5%	1,514.00	-	1,514.00	1,514.00
• A5 Plan – Emp + Children	1,502.00	+2%	1,473.00	+2.5%	1,437.00	-	1,437.00	1,437.00
• A5 Plan - Family	2,375.00	+2%	2,328.00	+2.5%	2,271.00	-	2,271.00	2,271.00
DENTAL								
• D5 Plan	80.00	-	80.00	-	80.00	-	80.00	90.00
• D7 Plan	100.00	-	100.00	-	100.00	-	100.00	110.00
• D8 Plan	120.00	-	120.00	-	120.00	-	120.00	130.00
• Orthodontia Ryder			1/1/2022 Orthodontia is included with dental plans					11.00
TIME LOSS								
• TL2 Plan	9.00	-	9.00	-	9.00	-	9.00	9.00
• TL4 Plan	25.00	-	25.00	-	25.00	-	25.00	25.00
VISION								
• Vision 3 Plan	20.00	-	20.00	-	20.00	+2.00	18.00	18.00

Changes:

1/01/2021 Vision Source Plan (VSP) for Vision Plan V3

1/01/2022 Vision Source Plan (VSP) for Medical Plans AV8 and AV9

1/01/2022 Delta Dental of WA for Dental Plans

1/01/2025 Plan D8 Annual Maximum increased to \$2,500