



2022 Benefit Contributions

Medical Plan: Maine Municipal Employee Health Trust PPO-500 Plan via Anthem

Level of Coverage	Total Monthly Premium	Employer 48-week Contribution (88%)	Employee 48-week Contribution (12%)
Employee Only	\$868.37	\$191.04	\$26.05
Employee + Child(ren)	\$1,416.89	\$311.72	\$42.51
Employee + Spouse or Family	\$1,947.88	\$428.53	\$58.44
Married Employee with Dependents*	\$1,947.88	\$434.19	\$52.79

Married employees with no children are required to carry two individual plans. No opt-out reimbursement is available. *Married employees with children are required to enroll in the family plan with a special employer contribution calculation.

Per IRS rules, any *domestic partner* benefits provided by the City will be considered a taxable benefit to you. The portion of the premium for the domestic partner's coverage, which the City pays is included in your income, known as imputed income. Pre-and post-tax deductions apply.

Opt-Out

Level of Coverage	Weekly Opt-Out Reimbursement (30% - Fire, AFSCME, General Unit, Non-Union)	Weekly Opt-Out Reimbursement (35% - Police and Dispatch)
Employee Only	\$52.90	\$61.72
Employee + Child(ren)	\$86.32	\$100.71
Employee + Spouse or Family	\$118.67	\$138.45

Dental and Vision Plan: Allegiant Care (NNEBT) (Fire and Dispatch)

Level of Coverage	Total Monthly Premium	Employer 52-week Contribution	Employee 52-week Contribution
Fire Hired before 1/1/03	\$150.40	\$34.70 (100%)	\$0.00 (0%)
Fire Hired after 1/1/03	\$150.40	\$31.23 (90%)	\$3.47 (10%)
Dispatch	\$150.40	\$34.70 (100%)	\$0.00 (0%)

Dental Plan: Northeast Delta Dental (Rates through June 30, 2022)

Level of Coverage	Total Monthly Premium	Employee 48-week Contribution (10% - AFSCME)	Employee 48-week Contribution (15% - Police & General Unit)	Employee 48-week Contribution (10% - NU Employee Only, 20% - NU Employee + 1 or Family)
Employee Only	\$42.09	\$1.05	\$1.58	\$1.05
Employee + One (2-Person)	\$78.50	\$1.96	\$2.94	\$3.93
Family (3 Person)	\$137.70	\$3.44	\$5.16	\$6.89

Domestic Partner coverage available and subject to IRS rules as noted above.

Vision Plan: Maine Municipal Employee Health Trust via VSP

Level of Coverage	Total Monthly Premium	Employee 48-week Contribution (100%)
Employee Only	\$5.58	\$1.40
Employee + Spouse	\$11.15	\$2.79
Employee + Child(ren)	\$11.94	\$2.98
Family	\$19.09	\$4.77

Domestic Partner coverage available and subject to IRS rules as noted above.

Income Protection Plan (IPP): Maine Municipal Employee Health Trust via Unum

Levels of Coverage	Employee 48-week Calculation (100%)
40%, 55%, 70% of annual base salary	\$2.04 per \$100 of coverage
Calculation	Annual Base Salary x Level of Coverage (.4, .55, or .7) = Annual Benefit Amount
	Annual Benefit Amount x Rate of .0204 = Annual Cost of Coverage
	Annual Cost of Coverage ÷ 48 weeks = weekly contribution

MainePERS (Rates through June 30, 2022)

Plan	Employee Contribution
Regular AC (Age 60)	7.8%
Regular AC (Age 65)	7.05%
Special 1C (Police)	9.2%
Special 3C (Fire & Dispatch)	9.7%