

EXHIBIT 3.1  
MISSOULA COUNTY EMPLOYEE BENEFITS PLAN DOCUMENT  
EMPLOYER/EMPLOYEE CONTRIBUTION RATES - MISSOULA COUNTY  
EFFECTIVE JULY 1, 2018

EMPLOYEE STATUS	COVERAGE	COUNTY	PER PAY PERIOD (26)		MONTHLY TOTAL
			EMPLOYEE	TOTAL	

MEDICAL BENEFIT

FULL-TIME	SINGLE	\$272.31	\$ 0.00	\$272.31	\$590.00
	EMPL/CHILD	364.15	91.85	456.00	988.00
	EMPL/SP/DP	391.61	119.31	510.92	1,107.00
	FAMILY	483.69	211.39	695.08	1,506.00
1/2-TIME	SINGLE	136.16	136.16	272.31	590.00
	EMPL/CHILD	182.09	273.91	456.00	988.00
	EMPL/SP/DP	195.81	315.11	510.92	1,107.00
	FAMILY	241.85	453.23	695.08	1,506.00

DENTAL BENEFIT

FULL-TIME	SINGLE	\$19.85	\$ 0.00	\$19.85	\$43.00
	EMPL/CHILD	19.85	28.61	48.46	105.00
	EMPL/SP/DP	19.85	15.33	35.18	76.00
	FAMILY	19.85	44.30	64.15	139.00
1/2-TIME	SINGLE	9.93	9.93	19.85	43.00
	EMPL/CHILD	9.93	38.53	48.46	105.00
	EMPL/SP/DP	9.93	25.15	35.08	76.00
	FAMILY	9.93	54.22	64.15	139.00

VISION BENEFIT (MONTHLY)

FULL-TIME	SINGLE	\$0.00	\$12.50		\$12.50
EMPL/CHILD	0.00	23.00		23.00	
	OR	EMPL/SP/DP	0.00	23.60	23.60
1/2-TIME	FAMILY	0.00	34.10		34.10

LIFE (MONTHLY)

1/2-TIME OR MORE	\$4.00	0.00
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LONG TERM DISABILITY (% OF COVERED PAYROLL)

1/2 TIME OR MORE	0.18%	0.00
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Wellness (MONTHLY)

FULL/PART	ALL	\$6.00	\$6.00
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MISSOULA COUNTY EMPLOYEE BENEFITS PLAN - CONTRIBUTION RATES  
 EFFECTIVE JULY 1, 2017  
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RETIREES MEDICAL BENEFITS (MONTHLY)

STANDARD		OPTIONAL
\$500 DEDUCTIBLE		\$2,500 DEDUCTIBLE
<u>\$150 RX DEDUCTIBLE</u>		<u>\$ 500 RX DEDUCTIBLE</u>
SINGLE	\$590.00	\$412.70
EMPL/CHILD	988.00	691.90
EMPL/SPOUSE/DP	1,107.00	774.70
FAMILY	1,506.00	1053.90

\*\* A DEDUCTION EQUAL TO THE ACTUAL MEDICARE PART B COST PER PERSON PER MONTH IS AVAILABLE TO A RETIREE AND/OR SPOUSE/DOMESTIC PARTNER OF A RETIREE UPON RECEIPT OF SATISFACTORY EVIDENCE OF COVERAGE UNDER BOTH MEDICARE PART A AND PART B - MEDICARE MUST BE PRIMARY INSURANCE.

RETIREES DENTAL BENEFITS (MONTHLY)

SINGLE	\$ 43.00
EMPL/CHILD	105.00
EMPL/SPOUSE/DP	76.00
FAMILY	139.00

RETIREE VISION BENEFITS (MONTHLY)

SINGLE	\$ 12.50
EMPL/CHILD	23.00
EMPL/SPOUSE/DP	23.60
FAMILY	34.10

EXHIBIT 3.2

MISSOULA COUNTY EMPLOYEE BENEFITS PLAN DOCUMENT  
OUTSIDE AGENCY MONTHLY CONTRIBUTION RATES:  
AIRPORT AUTHORITY/ART MUSEUM/LARCHMONT/  
MISSOULA RURAL FIRE/EDUCATION COOPERATIVE/URBAN TRANSPORTATION/  
FRENCHTOWN RURAL FIRE DISTRICT/AGING SERVICES/  
SEELEY LAKE RURAL FIRE DISTRICT  
EFFECTIVE JULY 1, 2018

MEDICAL BENEFIT

STANDARD		OPTIONAL
\$500 DEDUCTIBLE		\$2,500 DEDUCTIBLE
\$150 RX DEDUCTIBLE		\$ 500 RX DEDUCTIBLE
SINGLE	\$590.00	\$412.70
EMPL/CHILD	988.00	691.90
EMPL/SPOUSE/DP	1,107.00	774.70
FAMILY	1,506.00	1053.90

DENTAL BENEFIT

SINGLE	\$43.00
EMPLOYEE/CHILD	105.00
EMPLOYEE/SP/DP	76.00
FAMILY	139.00

VISION BENEFIT

SINGLE	\$12.50
EMPLOYEE/CHILD	23.00
EMPLOYEE/SP/DP	23.60
FAMILY	34.10

LIFE

EMPLOYEE	\$4.00
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LONG TERM DISABILITY

EMPLOYEE	0.18% (COVERED PAYROLL)
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SERVICE FEES

(PER ACTIVE EMPLOYEE - 4 MINIMUM SEELEY LAKE RFD)

MEDICAL	12.00
DENTAL	2.00

VISION	INCL
RETIREEES	INCL
COBRA	INCL
LIFE	INCL
LTD	INCL

SP = Spouse; DP = Domestic Partner