

EXHIBIT 3.1
MISSOULA COUNTY EMPLOYEE BENEFITS PLAN DOCUMENT
EMPLOYER/EMPLOYEE CONTRIBUTION RATES-MISSOULA COUNTY
EFFECTIVE JULY 1, 2019

EMPLOYEE STATUS	COVERAGE	PER PAY PERIOD (26)		MONTHLY TOTAL	
		COUNTY	EMPLOYEE TOTAL		
MEDICAL BENEFIT					
FULL-TIME	SINGLE	\$279.23	\$0.00	\$279.23	\$605.00
	EMPL/CHILD	\$373.33	\$94.21	\$467.54	\$1,013.00
	EMPL/SP/DP	\$401.49	\$122.36	\$523.85	\$1,135.00
	FAMILY	\$495.87	\$216.75	\$712.62	\$1,544.00
1/2-TIME	SINGLE	\$139.62	\$139.61	\$279.23	\$605.00
	EMPL/CHILD	\$186.70	\$280.84	\$467.54	\$1,013.00
	EMPL/SP/DP	\$200.78	\$323.07	\$523.85	\$1,135.00
	FAMILY	\$247.98	\$464.64	\$712.62	\$1,544.00
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
	EMPL/SP/DP	\$0.00	\$23.60		\$23.60
	FAMILY	\$0.00	\$34.10		\$34.10
LIFE (MONTHLY)					
1/2-TIME OR MORE		\$2.80	0.00		
LONG TERM DISABILITY (% OF COVERED PAYROLL)					
1/2 TIME OR MORE		0.17%	0.00		
Wellness (MONTHLY)					
FULL/PART	ALL	\$6.00		\$6.00	

MISSOULA COUNTY EMPLOYEE BENEFITS PLAN - CONTRIBUTION RATES
EFFECTIVE JULY 1, 2019
PAGE 2

RETIREEES MEDICAL BENEFITS (MONTHLY)

STANDARD		OPTIONAL
\$500 DEDUCTIBLE		\$2,500 DEDUCTIBLE
\$150 RX DEDUCTIBLE		\$500 RX DEDUCTIBLE
SINGLE	\$605.00	\$423.02
EMPL/CHILD	1,013.00	\$709.20
EMPL/SPOUSE/DP	1,135.00	\$794.07
FAMILY	1,544.00	\$1,080.25

** 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.**

RETIREEES DENTAL BENEFITS (MONTHLY)

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

RETIREEE 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
MOUNTAIN LINE / FRENCHTOWN RURAL FIRE DISTRICT
MISSOULA AGING SERVICES / SEELEY LAKE RURAL FIRE

MEDICAL BENEFIT

STANDARD		OPTIONAL
\$500 DEDUCTIBLE		\$2,500 DEDUCTIBLE
\$150 RX DEDUCTIBLE		\$500 RX DEDUCTIBLE
SINGLE	\$605.00	\$423.02
EMPL/CH	\$1,013.00	\$709.20
EMPL/SPOUSE/DP	\$1,135.00	\$794.07
FAMILY	\$1,544.00	\$1,080.25

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

SERVICE FEES

MEDICAL	\$12.00
DENTAL	\$2.00

VISION INCL

SP = Spouse; DP = Domestic Partner