

2025 Employee Benefit Guide

January 1 – December 31, 2025

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A Message to Our Employees

At Washington County, we recognize our ultimate success depends on our talented and dedicated workforce. We understand the contribution each employee makes to our accomplishments and so our goal is to provide a comprehensive program of competitive benefits to attract and retain the best employees available. Through our benefits programs, we strive to support the needs of our employees and their dependents by providing a benefit package that is easy to understand, easy to access and affordable for our employees. This brochure will help you choose the type of plan and level of coverage that is right for you.

Sincerely,

Your Human Resources Team



Benefits for You & Your Family

Washington County is pleased to announce our 2025 benefits program, which is designed to help you stay healthy, feel secure and maintain a healthy work/life balance. Offering a competitive benefits package is just one way we strive to provide our employees with a rewarding workplace. Please read the information provided in this guide carefully. For full details about our plans, please refer to the Summary of Benefits and Coverage on Horizons. Listed below are the benefits offered to you by Washington County:

- Medical
- Dental
- Vision
- Flexible Spending Accounts
- HRA VEBA
- Basic Life/AD&D
- Voluntary Life
- Individual Voluntary Short-Term Disability
- Long Term Disability
- Employee Assistance Program

Eligible Employees

Regular status and Limited Duration full-time employees working 30 hours or more per week are eligible for benefits beginning the first of the month following the date of hire.

Eligible Dependents

If you are eligible for our benefits, then your dependents are too. In general, eligible dependents include your spouse or domestic partner and children up to age 26. Children may include biological, adopted, stepchildren and children obtained through a court-appointed legal guardianship, as well as children of state-registered domestic partners.

When Coverage Begins

The effective date for your benefits is January 1, 2025. Newly hired employees and dependents will be eligible for benefits on the first of the month following the date of hire. All elections are in effect for the entire plan year and can only be changed during open enrollment, unless you experience a qualifying event.

Qualifying Events

A qualifying event is a change in your personal life that may impact your eligibility or dependent's eligibility for benefits. Examples of some family status changes include:

- Change of legal marital status (marriage, divorce, death of spouse, legal separation)
- Change in number of dependents (birth, adoption, death, ineligibility due to age)
- Change in employment or job status (spouse loses job, etc.)



Helpful Terms and Definitions

Allowed Amount: The maximum charge a plan will consider for a covered health care service.

Balance Billing: Out-of-Network providers are paid based on the plan's allowable amount for the care received. Any amounts billed over the allowable amount are the patient's responsibility, in addition to their cost share. Seeking care from In-Network providers and participating pharmacies will protect you from Balance Billing.

Coinsurance: Coinsurance is when you share paying a percentage of the cost of services.

Copay: A copay is a set payment amount for a specific service.

Deductible: A deductible is the amount you pay each calendar year before the plan begins sharing in the cost of services. On some plans, many day to day services do not require the deductible to be met.

HRA VEBA: The HRA VEBA is a health reimbursement arrangement (HRA) program funded by your employer to help pay for out-of-pocket medical, dental and vision expenses. If not used, the money will rollover and can be saved and used later to pay for medical costs, including premiums, even when you retire or leave the county.

Non-Participating Provider: If you see a Non-Participating provider (out-of-network provider) that does not have a contract with the insurance company, your out-of-pocket expenses will generally be higher than In-Network Providers. In addition, you may be billed for balances beyond any deductible, copay, and/or coinsurance, which is referred to as "balance billing."

Out-of-Pocket Maximum: This is the most you would pay for eligible medical expenses in a calendar year. This includes your deductible, copays and coinsurance. Once you reach the out-of-pocket maximum, the plan pays 100% of eligible charges for the balance of the calendar year.

Preferred Provider: If you see a Preferred Provider (in-network provider) you save the most in out-of-pocket expenses. Choosing this category means you will not be billed for balances beyond any deductible, copay, and/or coinsurance for covered services.

Premium: A premium is the cost for your medical insurance. You pay a portion through payroll deductions (generally on a pre-tax basis, with the exception of dependents through a registered domestic partnership) and Washington County pays the balance.



Wellness



Washington County is committed to supporting your wellness by providing access to free online personal health assessments, health-related videos and articles and other strategies which support the overall health of you and your family. An important part of our wellness program is the Wellness Incentive which gives employees the opportunity each year to qualify for lower monthly costs by completing select wellness activities.

Washington County pays 90% of the medical/dental/vision premium for you and your family. If you choose to participate in the wellness program and you earn the Wellness Incentive, Washington County will contribute an additional 5% towards your medical/dental/vision premium for the following calendar year. You will have from October 1st – September 30th each year to earn the Wellness Incentive.

- Select and complete wellness activities throughout the year and track them on the Personify Health website or mobile app to earn a minimum of 20,000 Personify Health points.
- You will find many activities to choose from and their corresponding Personify Health points by going to the Rewards section of your Personify Health account.



Employees hired on or after June 1st will automatically qualify for the Wellness Incentive the following year.

Preventive Care

At the Doctor's Office

It's recommended that you choose an in-network primary care physician (PCP) for your medical coverage. A PCP can be your Family Practitioner, Internist, General Medicine, Pediatrician, or an OB/GYN (Obstetrician and Gynecologist). Each member of your family may have a different PCP.

If you are newly enrolling in medical benefits, make an appointment with your PCP once the plan year has begun, even if you're NOT sick. This relationship will set the foundation for staying healthy—today and well into the future.

Note: The Low Deductible Plan with Providence's Choice Network, will require a medical home selection for a PCP.

Preventive Care

You and your family have access to a wide range of preventive services under the Affordable Care Act. These services are 100% covered by your medical plan when using in-network providers. For more details about the covered services please visit www.healthcare.gov/coverage/preventive-care-benefits.

Common preventive services include:



Routine physicals (age 18+) or Pediatric exams (birth to age 17)



Gender appropriate exams and screenings



Blood pressure screening for adults and children



Immunizations for adults and children

Medical Plan Overview

Washington County provides employees the opportunity to select from three medical plan options through Kaiser and three medical plan options through Providence Health Plan. As you evaluate your options, consider how each plan works, what services you are likely to use, if your doctors are included in the carrier's network and how much you want to pay each month.

Below is a high-level overview of the plan options and the associated network of providers. You will find detailed summaries in the following pages.

Kaiser Plan Options

If you choose Kaiser, all care must be received from Kaiser providers, except in cases of medical emergencies. Kaiser provides convenient and flexible options to access care and manage your health.

High Deductible HMO with HRA VEBA

- When you enroll in this plan, Washington County will make a monthly contribution to an HRA VEBA account in your name. This money is intended to be used for any out of pocket medical, dental or vision services. If not used, any remaining balance will rollover and stay with you, even beyond your employment with the county.

High and Low Deductible HMO Plans

- Traditional HMO plan with copays and deductibles.

Providence Plan Options

If you choose Providence, care is accessed from community providers who are contracted with Providence.

High Deductible PPO with HRA VEBA

- **Provider Network:** Signature Network
- When you enroll in this plan, Washington County will make a monthly contribution to an HRA VEBA account in your name. This money is intended to be used for any out of pocket medical, dental or vision services. If not used, any remaining balance will rollover and stay with you, even beyond your employment with the county.

High Deductible Plan

- **Provider Network:** Signature Network
- Traditional PPO plan with copays and deductibles.

Low Deductible Plan

- **Provider Network:** Choice Network
 - The choice network is an integrated network using the medical home model of primary and specialty care. When you enroll in this plan, you must designate a Primary Care Provider (PCP) who is part of the Choice Network. No referrals are required.
- Traditional PPO plan with copays and deductibles.

Kaiser Medical Plan Options

Washington County offers three medical plan options through Kaiser. When you enroll with Kaiser, all care must be received from Kaiser providers, except in cases of medical emergencies.

The chart below is a brief outline of the options. Please refer to the summary plan descriptions for details.

Benefit Coverage	Kaiser HMO				
	High Deductible with HRA VEBA	High Deductible Plan		Low Deductible Plan	
Annual Deductible					
Individual	\$2,000	\$1,500		\$750	
Family	\$4,000	\$3,000		\$1,500	
Annual Out-of-Pocket Maximum					
Individual	\$4,000	\$3,200		\$2,000	
Family	\$8,000	\$9,600		\$4,000	
Preventive Care					
Adult Periodic Exams	Covered in full	Covered in full		Covered in full	
Well-Child Care	Covered in full	Covered in full		Covered in full	
Physician Visits					
On-Demand Care	20% after deductible	Covered in full		Covered in full	
Primary Care – <i>In person</i>	20% after deductible ¹	\$15 Copay ¹		\$15 Copay ¹	
Primary Care - <i>Virtually</i>	20% after deductible ¹	Covered in full		Covered in full	
Specialty Care	20% after deductible	\$25 Copay		\$25 Copay	
Naturopathic Care	20% after deductible ¹	\$15 copay ¹		\$15 copay ¹	
Acupuncture – 24 visits	20% after deductible	\$25 copay		\$25 copay	
Chiropractic Care – 30 visits	20% after deductible	\$25 copay		\$25 copay	
Massage Therapy – 12 visits	20% after deductible	\$25 copay		\$25 copay	
Diagnostic & Hospital Services					
X-ray and Lab Tests	20% after deductible	\$25 copay		\$25 copay	
Complex Imaging	20% after deductible	\$200 copay		\$200 copay	
Urgent Care Facility	20% after deductible	\$35 copay		\$35 copay	
Emergency Room	20% after deductible	\$150 copay		\$150 copay	
Inpatient Hospital	20% after deductible	20% after deductible		20% after deductible	
Outpatient Surgery	20% after deductible	20% after deductible		20% after deductible	
Mental Health & Chemical Dependency					
Inpatient Services	20% after deductible	20% after deductible		20% after deductible	
Outpatient – <i>In person</i>	20% after deductible ¹	\$15 copay ¹		\$15 copay ¹	
Out of Network Services					
Non-Network Services	Not covered	Not covered		Not covered	
Pharmacy	30-day retail or 90-day mail order	30-Day Retail	90-Day Mail Order	30-Day Retail	90-Day Mail Order
Generic	20% after deductible	\$15 copay	\$30 copay	\$15 copay	\$30 copay
Brand	20% after deductible	\$30 copay	\$60 copay	\$30 copay	\$60 copay
Specialty	20% after deductible	50% to \$100		50% to \$100	

¹Due to Oregon SB1529-B, your first 3 office visits on all three plan options will be at a reduced \$5 copay, the deductible does not apply.

Providence Medical Plan Options

Washington County offers three medical plan options through Providence Health Plan. As you evaluate your options, consider how each plan works, what services you are likely to use, if your doctors are included in the carrier's network and how much you want to pay each month.

The chart below is a brief outline of the options. Please refer to the summary plan descriptions for details.

	Providence Health Plan				
Benefit Coverage	High Deductible with HRA VEBA	High Deductible Plan		Low Deductible Plan	
Network	Signature Network	Signature Network		Choice Network	
Annual Deductible					
Individual	\$2,000	\$1,250		\$500	
Family	\$4,000	\$3,750		\$1,500	
Annual Out-of-Pocket Maximum (In-Network)					
Individual	\$4,000	\$3,200		\$2,200	
Family	\$8,000	\$9,600		\$6,600	
Preventive Care					
Adult Periodic Exams	Covered in full	Covered in full		Covered in full	
Well-Child Care	Covered in full	Covered in full		Covered in full	
Physician Visits					
Providence On-Demand Care	Covered in full	Covered in full		Covered in full	
Primary Care – <i>In person</i>	20% after deductible ¹	\$25 copay ¹		\$15 copay ¹	
Primary Care - <i>Virtually</i>	20% after deductible ¹	\$10 copay ¹		\$10 copay ¹	
Specialty Care	20% after deductible	\$35 copay		\$15 copay	
Naturopathic Care	20% after deductible ¹	\$25 copay ¹		\$15 copay ¹	
Acupuncture – 20 visits	20% after deductible	\$25 copay		\$15 copay	
Chiropractic Care – 20 visits	20% after deductible	\$25 copay		\$15 copay	
Massage Therapy - \$2,000 max.	20% after deductible	\$15 copay		\$15 copay	
Diagnostic & Hospital Services					
X-ray and Lab Tests	20% after deductible	20% after deductible ²		20%, deductible waived	
Complex Imaging	20% after deductible	20% after deductible		20% after deductible	
Urgent Care Facility	20% after deductible	\$35 copay		\$15 copay	
Emergency Room	20% after deductible	\$250 after deductible		\$250 after deductible	
Inpatient Hospital	20% after deductible	20% after deductible		20% after deductible	
Outpatient Surgery	20% after deductible	20% after deductible		20% after deductible	
Mental Health & Chemical Dependency					
Inpatient Services	20% after deductible	20% after deductible		20% after deductible	
Outpatient – <i>In person</i>	20% after deductible ¹	\$25 copay ¹		\$15 copay ¹	
Out of Network Services					
Non-Network Services	Please see Providence benefit summary for details.				
Pharmacy	30-day retail or 90-day mail order	30-Day Retail	90-Day Mail Order	30-Day Retail	90-Day Mail Order
Preferred Generic (Tier 1)	20% after deductible	\$10 copay	\$20 copay	\$10 copay	\$20 copay
Non-Preferred Generic (Tier 2)	20% after deductible	\$15 copay	\$30 copay	\$15 copay	\$30 copay
Brand (Tier 3, Tier 4)	20% after deductible	\$50 copay	\$100 copay	\$50 copay	\$100 copay
Specialty (Tier 5)	50% up to \$150, after ded.	50% up to \$150		50% up to \$150	

¹ Due to Oregon SB1529-B, your first 3 Primary Care or Naturopathic Care and first 3 Behavioral Health Care office visits on all Providence plans will be at a reduced \$5 copay, the deductible does not apply.

² The first \$500 for in-network x-ray and lab services will be covered in full. Any amount over \$500 is subject to deductible.

Finding Care with Kaiser

Kaiser Network Providers

Kaiser is an HMO plan, which means that you must stay in-network in order to receive a benefit. Out-of-network coverage is available in an emergency. Kaiser providers include Kaiser facilities and other community affiliates. To find Kaiser locations, visit kp.org.

- Click 'Doctors and Locations'
- Enter your zip code
- Choose provider type 'Community Affiliates' or 'Kaiser Providers' from the dropdown
- Add the provider name if available and search

Care While Traveling

You have access to urgent and emergency care anywhere in the world. And now, when you're outside a Kaiser Permanente state, you can visit any Cigna PPO Network provider without paying upfront or filing a claim. This includes MinuteClinic and Concentra Urgent Care locations outside a Kaiser state. Kaiser states include Oregon, Washington, California, Colorado, Georgia, Maryland, Washington D.C. and Hawaii.

Dependent Out of Area Benefit

Kaiser provides specific coverage for dependent children who reside outside the service area.

- If your child lives in a different Kaiser region, they may register as a visiting member and access services at their local Kaiser facilities.
- If your child lives where Kaiser does not provide services, benefits are limited to 10 office visits, 10 basic lab and x-ray services and 10 prescriptions per year. Urgent and emergency services are always available.
- Contact Kaiser for more information.

Routine Care at your fingertips

Talk to a doctor anytime for free! Get 24/7 care and advice from Kaiser clinicians by phone or online. Access care by phone, video or e-visit.

Setting Up Your Account Is Easy:

- Online at kp.org
- Mobile App available for iPhone and Android

Pharmacy

The Kaiser pharmacy benefit is a 2-tier benefit, with additional Specialty tier. Pick up new prescriptions the same day. Most medications are available through mail order and delivered within 3 – 5 days at no extra cost. Refills can be submitted online or through the Kaiser mobile app.

CHP Group

Kaiser utilizes the CHP Group who provides access to a local network of high-quality integrative healthcare providers – including chiropractic and naturopathic physicians, licensed acupuncturists, and licensed massage therapists. To find a provider, visit chpgroup.com.



- Click 'Find a Provider'
- Under 'Required Information' enter 'Kaiser Permanente Self-Referred'
- Choose the type of provider
- Enter your location, preferred language and click 'search'

Gender Pathways

The Gender Pathways Clinic at Kaiser Permanente Northwest provides culturally competent care to transgender and gender-expansive patients. Find more information at genderpathways.org.

Kaiser Value-Added Benefits

Kaiser members have access to a variety of care for different situations. Your Kaiser Health Plan also offers tools and discounts to help manage your overall wellness. Get started by checking out all the perks and programs at kp.org/health-wellness.

Mental Health and Wellness – Self-Care Apps

The below wellness apps are available to Kaiser members at no cost. Access more information at kp.org/selfcareapps.

[Calm](#)

Calm is the #1 app for meditation and sleep – designed to help lower stress, reduce anxiety, and more. Access all the features of Calm, including guided meditations, sleep stories, and gentle stretches.



[Headspace Care](#)

Text one-on-one with an emotional support coach anytime, anywhere. Support is just a text message away.



- 24/7 text-based emotional support coaching
- Discuss goals, share challenges, and create an action plan with your coach
- Self-care resources recommended for your needs

Health Engagement

The Health Engagement and Wellness Services team is part of the Kaiser family of health, dedicated to helping you discover your total health. Below are some resources to help you get started on your journey. More information can be found at kp.org/healthengagement.

[Health Coaching](#)

Health coaching is offered at no cost to Kaiser members. The programs provide one-on-one guidance to help you set goals and see results. Health coaching programs can be used for weight & stress management, exercise programs, diabetes prevention, tobacco cessation, and more. Call 1-866-862-4295 to make an appointment.

[Classes](#)

Engage in your health by participating in classes led by registered dietitians, health coaches, certified diabetes educators and other health professionals. Classes are offered on a variety of topics such as Active Living, Life Care Planning, Weight Management, Mind and Body Health, and more.

[Wellness Topics](#)

Kaiser providers online toolkits to address wellness topics such as Aging, Anxiety, Depression, Kids and Family Health, Nutrition and Eating Healthy, Sleep, and more.

Fitness Deals

Access deals on fitness classes and related items at kp.org/health-wellness. Under Programs and classes, click on Fitness & exercise deals.

[ClassPass](#)

ClassPass partners with 40,000 gyms and studios around the world to provide members with access to yoga, dance, cardio, boxing, Pilates, boot camp, and more. Unlimited on-demand video workouts are available at no cost to Kaiser members.

[ChooseHealthy](#)

Gym Membership – Kaiser members may participate in the Active & Fit Direct Program. This gives you access to over 9,000 fitness centers nationwide for a low monthly cost!

Product Discounts – Discount activity trackers, workout apparel and exercise equipment from leading brands.

Finding Care with Providence

Providence Network Providers – *Signature or Choice Network*

When you utilize providers who participate in Providence's network, you'll receive the highest benefit level. Search for hospitals, medical facilities, and health care providers using Providence's provider directory at PHPpd.Providence.org. This directory shows all providers for the entire United States, so all members may use the same directory regardless of your location.

- Click 'Browse by Provider Networks'
- Choose plan type 'Coverage through My Employer' from the dropdown
- If enrolling in the High Deductible with HRA VEBA or the High Deductible plan, choose provider network 'Providence Signature Network' from the dropdown
 - If enrolling in the Low Deductible plan, choose provider network 'Providence Choice Network'.
- Click Search
- From there you can search for a Care Provider or a Place (hospital, clinic, etc.)
 - When the Choice Network is selected, you may also narrow your search to Medical Home Primary Care Providers.

Provider Characteristics

Once you complete your provider search, you can narrow down your search results based on the personal characteristics and attributes of the provider such as gender, race, ethnicity and personal identity. You can also search based on religious communities or communities of interest like LGBTQ+, homeless, refugees, transgender and more.

Pharmacy

The Washington County plan utilizes Providence's Formulary B – this indicates how each prescription is covered by Providence. Your medications can be picked up at a local pharmacy or shipped to you using mail order delivery. If you are taking any specialty medications, Providence provides a dedicated specialty care team to provide extra support and financial assistance resources.

Outside of Oregon and SW Washington

Members have access to In-Network coverage through Cigna's PPO Network for medical care and Beacon Health Options for behavioral health services. Out-of-area providers may not be familiar with Providence, so members may call ahead to their provider's office to confirm they are contracted with the Cigna PPO Network (medical) or Beacon Health Options (mental health and chemical dependency). If the provider doesn't recognize the network name, they may call Providence's Customer Service at the number on the back of your member ID card.

ExpressCare Virtual

Talk to a doctor anytime for free! Providence ExpressCare Virtual provides convenient virtual treatment on your smartphone, tablet or computer. This live, secure, confidential visit is perfect for common health concerns such as sinus, ear and eye infections, cough, cold, flu, rashes, etc. Members have access to board-certified providers, 7 days a week from 8 a.m. to midnight. These providers can also write prescriptions.

Setting Up Your Account Is Easy:

- Online at Virtual.Providence.org
- Mobile App available for iPhone and Android

ExpressCare Clinics

Need an appointment right away? Providence ExpressCare Clinics offer same-day appointments, 7 days a week. These clinics can be found inside many Portland area Walgreens stores. ExpressCare Clinic visits are free for Providence members. Go to ProvidenceExpressCare.org to schedule.

Providence Value-Added Benefits

Providence members have access to a variety of care for different situations. Your Providence Health Plan also offers tools and discounts to help manage your overall wellness. Get started by checking out all the perks and programs at ProvidenceHealthPlan.com/Member-Perks.

Connect with Your Health

Providence Health Plan members have access to MyProvidence.org. This is your secure total health management website that includes on-demand access to health plan information, a searchable provider directory, treatment cost calculators, and interactive health activities to keep you focused on your health & wellness goals.

To Set Up your My Providence Account:

- Visit MyProvidence.org
- Click 'Register' under Create an Account
- Complete your profile information, create a username and password. Note: You'll need your Providence member ID to register.

Talkspace

Talkspace is a virtual therapy service that provides personal behavioral health and emotional wellness support through online counseling and therapy from one of thousands of licensed counselors. Access to self-guided exercises such as journaling and medication.

Register: Talkspace.com/ProvidenceHealthPlan

Providence LifeBalance Program

LifeBalance is a free discount program which gives all Providence members access to thousands of discounts options. Learn more about your savings opportunities at LifeBalanceProgram.com and register at MyProvidence.org to get started.

Personal Health Coach

Health coaching is offered at no cost to Providence members. The programs provide one-on-one coaching sessions for personalized goal setting with easily manageable steps. These health coaching programs can be used for weight & stress management, exercise programs, diabetes prevention, tobacco cessation, and more. Visit ProvidenceHealthPlan.com/HealthCoach or call (888) 819-8999.

Discounted Gym Membership

Providence members may participate in the new One Pass Select program. Choose a membership tier that fits your lifestyle and access digital fitness apps, gym memberships, and home grocery delivery services. Visit ProvidenceHealthPlan.com/Member-perks to learn more.

Behavioral Health Concierge

Providence plan members and dependents can access virtual and confidential same-day or next day appointments at no cost with licensed behavioral health professionals for mental health and addiction issues. Visit ProvidenceHealthPlan.com/Member-Perks/Behavioral-Health-Resources or call (877) 744-WELL.

Learn to Live

Providence plan members now have access to the Learn to Live program. This is a virtual self-directed program based on the principles of Cognitive Behavioral Therapy (CBT). Begin by taking a comprehensive assessment that provides guidance on which program might benefit you most. To receive an access code, contact Providence Customer service at 503-574-7500.

Charlie Health

Personalized mental health support for teens, young adults, and families. Charlie Health provides Intensive Outpatient Programs designed for those who need more than once a week therapy.

Dental Insurance

Washington County provides the opportunity to choose between two dental plans. You can select from either the Delta Dental plan or Kaiser Dental plan. The charts below are brief outlines of the plans. Please refer to the summary plan descriptions for complete plan details.

Benefit Coverage	PPO Network	Premier Network	Out of Network
Calendar Year Costs			
Deductible	\$0		
Calendar Year Maximum Benefit	\$1,500 per member		
Class 1 – Preventive Care			
Periodic Exam and X-rays	Covered in full		
Periodic Cleanings / Periodontal Maintenance			
Fluoride Treatment and Sealants			
Class 2 – Basic Services			
Fillings	Year 1: 70% Year 2: 80% Year 3: 90% Year 4: Covered in full <i>To qualify for an annual increase in benefit payment, you must visit the dentist at least once during the year. Failure to do so will cause a 10% reduction in payment the following year.</i>		
Oral Surgery			
Endodontics			
Periodontics			
Class 3 – Major Services			
Crowns and other cast restorations	50%		
Implants	50%		
Dentures and Bridges	50%		
Orthodontia			
Adults and Children	50% up to \$1,500 Lifetime maximum benefit		

Provider Network Options

If you choose a non-participating dentist, your out-of-pocket expenses may be higher since you will be responsible for paying any difference between the dentist's fee and the plan's payment for the approved service. You can avoid this by seeing an In-Network Premier provider.

Finding an In-Network Provider

- Visit DeltaDentalOR.com
- Under 'Find a Provider' click Search Now
- Choose your location and select the Delta Dental PPO or Delta Dental Premier network to find In-Network providers.
 - **PPO Dentists** and **Premier Dentists** are both in-network and members are held harmless from balance billing.
 - **Out of Network Dentists** are not contracted with Delta Dental and members may be held liable for the difference between the dentist's billed charge and the non-participating allowable amount.



Pre-Treatment Estimate

If dental work exceeding \$300 is required, request a pre-treatment estimate from your provider. Simply submit your treatment estimate to Delta Dental, then you and your dentist can review your costs before beginning treatment.

	Kaiser Dental Plan <i>Kaiser Dental Facilities Only</i>
Calendar Year Costs	
Deductible	\$25 Individual / \$75 Family Maximum
Calendar Year Maximum Benefit	\$4,000 per member
Preventive & Diagnostic Services	
Routine Exams	Covered in full (deductible waived)
Routine X-Rays	
Teeth Cleaning	
Fluoride Treatment & Sealants	
Minor Restoration Services	
Fillings	Covered in full, after deductible
Plastic and Steel Crowns	
Simple Extractions	
Basic and Major Services	
Periodontics (Treatment of gum disease)	20% coinsurance
Endodontics (Root canal therapy)	20% coinsurance
Gold or Porcelain Crown	20% coinsurance
Bridge	20% coinsurance
Dentures	20% coinsurance
Orthodontia	
Adults and Children	50% up to \$3,000 Lifetime maximum benefit

In-Network Coverage Only

If you enroll in the Kaiser dental benefit plan, you will only have coverage at Kaiser Dental facilities. To find an in-network provider, visit kp.org/dental and click on Dentists & Locations → Search by Location.

Care Integration

Kaiser's integrated electronic medical and dental record system gives Kaiser dental providers access to your relevant health history, enabling greater collaboration. When covered by Kaiser medical and dental plans, you can save a trip by taking care of minor medical needs, like vaccinations, during your dental appointment.

- Visit kp.org/dental
- Call (503) 813-2000



Vision Insurance

Washington County offers vision insurance coverage through Vision Service Plan (VSP). This plan includes benefits for one routine eye exam and glasses or contact lenses every calendar year. Although you can go to any vision provider you choose, you'll receive the highest level of coverage when treating with a VSP provider. To locate a VSP network provider, visit [VSP.com](https://www.vsp.com) or call (800) 877-7195.

Below is a brief outline of the vision plan. Please refer to the summary plan description for complete details.

Benefit Coverage	VSP Vision Plan
	In-Network
Well Vision Exam	
Routine Eye Exam	\$5 Copay for Exam and Materials Once every calendar year
Essential Medical Eye Care	
Retinal Screening for members with diabetes	Covered in full
Medical Eye Exam	\$20 per exam <i>Available as needed to treat immediate issues such as pink eye, sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma and more.</i>
Prescription Glasses	
Lenses <i>Single, Bifocal, Trifocal, Standard Progressive</i>	Combined with Exam Once every calendar year
Lens Enhancements	Premium Progressive: \$95 to \$105 copay Custom Progressive: \$150 to \$175 copay Once every calendar year
Frames	\$150 allowance, extra \$20 allowance for featured frame brands 20% off amount above the allowance Once every calendar year
Frames at Affiliate Providers	Walmart / Sam's Club Frame allowance: \$150 Costco Frame allowance: \$80
Contacts (instead of glasses)	
Fitting and Evaluation	Up to \$60 copay Once every calendar year
Contact Lenses	\$150 allowance Once every calendar year

Laser Vision Correction Discount

Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities.

TruHearing Discount Program

TruHearing makes hearing aids affordable by providing exclusive savings to all VSP members. Save up to 60% on a pair of hearing aids. Plus, TruHearing provides up to 3 provider visits for fitting, programming, and adjustments at no cost. Hearing aids purchased through TruHearing include a 3-year manufacturer warranty for repairs and one-time loss & damage replacement. Learn more at [TruHearing.com/VSP](https://www.truhearing.com/VSP) or call (877) 396-7194.

Flexible Spending Accounts

The Flexible Spending Account (FSA) with PacificSource allows you to set aside pre-tax dollars to cover qualified expenses you would normally pay out of your pocket with post-tax dollars. The plan includes a health care spending account and a dependent care account. You pay no federal or state income taxes on the money you place in an FSA.

How an FSA Works

- Choose a specific amount of money to contribute two times per month, pre-tax, to one or both accounts during the plan year, January 1st through December 31st.
- The amount is automatically deducted from your pay at the same level each pay period.
- As you incur eligible expenses, you may use your flexible spending debit card to pay at the point of service OR submit the appropriate paperwork to be reimbursed by the plan.

Important Rules to Keep in Mind

- The IRS has a strict "use it or lose it" rule. If you do not use the full amount in your FSA, you will lose any remaining funds above the allowable amount for the Health Care FSA.
- Once you enroll in the FSA, you cannot change your contribution amount during the year unless you experience a qualifying life event.
- You cannot transfer funds from one FSA to another.
- Receipts are often required to access the funds.

Grace Period

This plan includes a grace period, which allows an additional 2 ½ months to incur claims. All claims must be incurred between January 1, 2025 – March 15th, 2026. Please consider your FSA contributions carefully, as any funds not spent at the end of the 2025 plan year will be forfeited. All claims must be submitted for reimbursement by June 15, 2026.

	Maximum Annual Election Per Pay Period ¹	Maximum Annual Election
Health Care FSA	\$137.50	\$3,300
Dependent Care FSA	\$208.33	\$5,000

¹ The maximum per pay period amount will vary based upon date of enrollment.

Examples of Health Care Expenses

- Medical services
- Dental care
- Vision expenses
- Prescription drugs
- Over-the-counter medications
- First aid supplies
- Menstrual products
- Contraceptives
- Orthopedic devices

Examples of Dependent Care Expenses

- Nursery schools, day camps, and licensed day care centers
- After school programs
- Services from individuals who provide day care in or outside the home
- Day care centers that provide nonresidential day care for dependent adults
- Children must be under age 13 and claimed as a dependent on your tax return

Life and AD&D Insurance

Washington County provides Basic Life and Accidental Death & Dismemberment (AD&D) insurance to eligible employees at no additional cost to you through Unum. The Life insurance benefit will be paid to your designated beneficiary in the event of death while covered under the plan. The AD&D benefit will be paid in the event of a loss of life or limb by accident while covered under the plan.

Unum Basic Life and AD&D	
Employee Basic Life and AD&D Benefit	
County Administrator and Major Department Heads	1.5x Annual Earnings to \$400,000
MAPPS	1x Annual Earnings to \$200,000
All other Non-Represented, Teamsters and ONA	\$10,000
FOPPO	\$50,000
WCPOA Enforcement, WCPOA SSG & AFSCME	\$50,000
Dependent Life Benefit	
Spouse or Domestic Partner – Teamsters and ONA	\$10,000
Child – Teamsters and ONA	\$10,000 <i>(Limited benefit available until 6 months of age)</i>
Spouse or Domestic Partner – All Other Groups	\$1,000
Child – All Other Groups	\$1,000

Portability & Conversion of Coverage

You may port this insurance coverage or convert your group term life coverage to an individual life insurance policy without providing evidence of insurability if you lose coverage due to leaving your job or for another reason outlined in the plan contract. You are responsible for paying the premiums on any ported or converted coverage.

Benefit Reductions

Insurance benefit amounts reduce to 65% at age 70. Coverage terminates at retirement.

Important Reminder

Be sure to assign a beneficiary or living trust to ensure your assets are distributed according to your wishes. You may update your assigned beneficiary anytime throughout the year, not just during open enrollment.



Voluntary Life Insurance

In addition to the employer-paid Basic Life and AD&D coverage, you have the option to purchase additional Voluntary Life insurance to cover any gaps in your existing coverage. Your election, however, could be subject to medical questions and evidence of insurability. Your premium costs depend on your age and the amounts of coverage you elect.

If you and your spouse both work for the County, you cannot cover each other through the voluntary life insurance, only one of you may cover the children.

Guarantee Issue Amounts

New and newly eligible employees who enroll within their first 30 days of eligibility have a one-time opportunity to enroll up to the Guarantee Issue amounts without providing health information. If you do not enroll when initially eligible, you will be required to provide evidence of "good health" for any amount elected.

Plan Conversion and Portability

If your coverage ends due to leaving your job or another reason outlined in the plan contract, you may convert your insurance, including your spouse and dependent(s) coverage, to an individual policy. Voluntary Life coverage for yourself, spouse and dependent(s) can also be ported to a group term life policy after your coverage with Washington County ends.



Benefit Reductions

Benefit amounts reduce to 65% at age 70.

Unum Voluntary Life Insurance	
Employee	
Benefit Amount	Increments of \$10,000
Guaranteed Issue	\$150,000
Maximum Benefit	6x annual salary up to \$300,000
Spouse or Domestic Partner	
Benefit Amount	Increments of \$5,000
Guaranteed Issue	\$25,000
Maximum Benefit	100% of employee amount up to \$300,000
Child(ren) up to Age 26	
Benefit Maximum	Flat \$2,000, \$5,000 or \$10,000
Guaranteed Issue	Full benefit amount
Maximum Benefit	\$10,000

Long-Term Disability Insurance

Your benefits program with Washington County provides long-term income protection at no additional cost to you through Unum. You also have the opportunity to purchase additional coverage to ensure your financial needs are met.

Unum Long-Term Disability Plan		
Employee	Employer Paid Base Plan	Voluntary Buy-up Plan
Benefit Waiting (Elimination) Period	90 days	90 days
Benefit Amount	60% of monthly earnings	66.6667% of monthly earnings
Maximum Benefit	\$2,500 per month	\$8,000 per month
Maximum Benefit Duration	To age 65 ¹	To age 65 ¹

¹ If disabled at age 60 or older a limited duration applies, see below:

Age at Disability	Maximum Period of Payment	Age at Disability	Maximum Period of Payment	Age at Disability	Maximum Period of Payment
< Age 60	To age 65, but at least 5 years	Age 63	36 months	Age 67	18 months
Age 60	60 months	Age 64	30 months	Age 68	15 months
Age 61	48 months	Age 65	24 months	Age 69+	12 months
Age 62	42 months	Age 66	21 months		

Definition of Disability

You are considered disabled when Unum determines that:

- You are limited from performing the material and substantial duties of your regular occupation due to sickness or injury; and
- You have a 20% or more loss of indexed monthly earnings due to the same sickness or injury.

After 24 months, you are considered disabled when Unum determines that due to the same sickness or injury, you are unable to perform the duties of any gainful occupation for which you are reasonably fitted by education, training or experience. You must be under the regular care of a physician to be considered disabled.



Calculate your Cost – Voluntary Buy-up

$$\begin{array}{lcl}
 \$ \underline{\hspace{2cm}} & \times 0.175 \div 100 & = \underline{\hspace{2cm}} \\
 \text{Monthly Income} & \text{Your rate per \$100} & \text{Monthly Employee Cost} \\
 \text{(if higher than \$11,999, use \$11,999)} & \text{of Covered Payroll} &
 \end{array}$$

Employee Assistance Program (EAP)

Life does not always go smoothly. All of us experience times when a personal problem or crisis affects the way we function at work or home. Your **Canopy Employee Assistance Program (EAP)** is a problem-solving resource available to you and your household members.

This program is free for all employees and household members. Your EAP has been set up with Canopy's outside counseling resources to ensure your confidentiality. You and your household members can contact clinicians 24/7 over the phone.

Confidential Counseling

- Up to 6 in-person or virtual sessions with a counselor per issue/incident
- Up to 10 in-person or virtual sessions with a counselor per issue/incident for law enforcement and first responders

Resources for Life

Contact Canopy for assistance with locating resources and information related to childcare, eldercare, caregiving, and anything else you may need.

Financial and Legal Services

- Access to a certified financial coach who will work with you to understand your current financial situation and set goals to work toward financial wellness.
- Contact Canopy for a free 30-minute legal consultation. A 25% discount from the attorney's/mediator's normal rate thereafter.

Identity Theft

Up to a 60-minute free consultation with a highly trained Fraud Resolution Specialist (FRS) who will help to restore identity, good credit, and dispute fraudulent debts.

Coaching and Wellbeing Tools

Meet with a coach to support goal setting, healthy habits, and personal development. Access fertility health support, wellness and gym discounts, online legal tools and a will kit questionnaire online.



Home Ownership Program

This exclusive program will make the decision to purchase, sell or refinance your home easier and less expensive. Canopy partners with Advantage Home Plus to give you access to a network of prescreened, mortgage and real estate professionals to receive significant discounts.

Virtual Care Navigator

Just answer a few questions to receive your personal 'My Plan' recommendations and fast connections to:

- Counseling and coaching
- Financial, legal, and family resources
- Digital tools and training

Get Started with Canopy Today

- **Call:** 1 (800) 433-2320
- **Visit:** my.canopywell.com
- **Access Code:** Washington County
- **Download your EAP App:** Search Canopy EAP or scan the below QR code:



Don't forget! You also have mental health and wellbeing services available through your medical plan!

Retirement Plans

Oregon Public Employee Retirement System

Employees working 600 hours or more per year will be enrolled in the Oregon PERS program automatically after fulfilling the required waiting period (6 months for most employees). If you have already satisfied the 6-month waiting period, you will be enrolled immediately. Most PERS-eligible employees pay a 6% employee contribution. The County “picks up” this 6% employee contribution for members of Washington County Police Officers Association (WCPOA).

	Tier 1	Tier 2	OPSRP
PERS Service Date	Before January 1, 1996	Between January 1, 1996 and August 28, 2003	On or after August 29, 2003
Normal Retirement Age	General Service – age 58 or any age with 30 years of service	General Service – age 60 or any age with 30 years of service	General Service – age 65 or age 58 with 30 years of service
	Police & Fire – age 55 or age 50 with 25 years of service	Police & Fire – age 55 or age 50 with 25 years of service	Police & Fire – age 55 or age 53 with 25 years of service
Early Retirement	General Service – age 55-57 with less than 30 years of service	General Service – age 55-59 with less than 30 years of service	General Service – age 55, if vested
	Police & Fire – age 50-54 with less than 25 years of service	Police & Fire – age 50-54 with less than 25 years of service	Police & Fire – age 50 with 5 years of continuous service in a P&F position immediately preceding effective retirement date
Vesting	5 years IAP immediate vesting	5 years IAP immediate vesting	5 years IAP immediate vesting
Unused Sick Leave Included in Final Average Salary	Yes	Yes	No
IAP Redirect ¹	2.5%	2.5%	0.75%

¹Employees who earn more than \$2,500 per month will see a portion of their Individual Account Program (IAP) contribution redirected to the pension stability fund at PERS. This redirect will help pay for the cost of your future pension and help create stability in the overall pension system. The result is a lower contribution to your personal IAP account. Please visit this link ([Voluntary IAP Election Change](#)) to learn how to voluntarily contribute additional funds to your IAP.

Deferred Compensation 457

Voya provides retirement plan investments and financial services to employees of Washington County. Employees are invited to participate in the 457 Deferred Compensation Plan. This voluntary deferred compensation program allows you to set aside up to \$23,500 in 2025 if you are under the age of 50, and an additional \$7,500 if you are age 50 or older.

Beginning in 2025, employees that reach age 60-63 by December 31st each year will have a higher catch-up contribution limit; increased to a greater of: \$10,000; or 150% of the regular age 50 catch-up limit.

Voya has over 30 funds from which to choose. Voya (www.voya.com) also has additional education and tools to help you save for retirement. If you need additional help you can schedule a one-on-one meeting with the County's Voya representative by calling 503-517-9363.

Paid Time Off

Washington County provides a generous leave program for regular status and limited duration employees working 20 hours or more per week. County employees are credited with vacation leave in accordance with the County Administrative Rules or respective Collective Bargaining Agreement if the employee is represented. The amount an employee accrues is based on the number of qualified pay periods they have worked for the County. Part-time regular status and limited duration employees will accrue vacation leave in an amount proportionate to that which would be accrued for full-time employment.

Holidays: Washington County employees receive 11 paid holidays including one floating holiday¹ in accordance with the County Administrative Rules or respective Collective Bargaining Agreement if the employee is represented.

¹*Floating holiday must be used by 12/31.*

Sick Leave: All County employees are credited with sick leave in accordance with the County Administrative Rules or respective Collective Bargaining Agreement if the employee is represented. Full-time employees may earn up to 96 hours per year of sick leave.

Extra Benefits

Washington County offers these additional benefits to complement your health and welfare coverage.

Carpooling

Employees can find a carpool match through an online matching program, [Get There Oregon](#). The site also helps with planning transit, bike routes and logging trips for commuter rewards.

County Bike Fleet

The County bike fleet, managed by the Sustainability Division, includes five easy-to-ride cruising bikes and one hybrid bike, available for employee business or personal use during the workday.

Electric Vehicle Charging

EV charging stations are available near several County facilities, including the downtown Hillsboro locations.

Biking and Walking Resources

Bike racks are available by County buildings, and employees can request access to a secure bike parking corral in the downtown Hillsboro Parking Garage. Locker rooms and showers are available for employee use at some offices as well as the Washington St Conference Center. Bike repair stations are located outside several County facilities.

Oregon College Savings Plan

This plan offers convenient payroll deductions. For more information, visit www.OregonCollegeSavings.com.



Medical, Dental & Vision Plan Costs

The following are monthly employee costs for the plans selected. Wellness means you have met the Wellness Activity Incentive in the previous plan year.

Kaiser Permanente - Medical Plan (Wellness Contributions)

Coverage Level	High Deductible with HRA VEBA	High Deductible	Low Deductible
Employee	\$32.27	\$35.97	\$39.08
Employee & Spouse/DP	\$60.95	\$71.93	\$78.17
Employee & Child(ren)	\$58.09	\$64.74	\$70.35
Employee & Family	\$96.83	\$107.90	\$117.26

Kaiser Permanente - Medical Plan (Non-Wellness Contributions)

Coverage Level	High Deductible with HRA VEBA	High Deductible	Low Deductible
Employee	\$64.55	\$71.93	\$78.17
Employee & Spouse/DP	\$121.90	\$143.87	\$156.34
Employee & Child(ren)	\$116.19	\$129.47	\$140.70
Employee & Family	\$193.65	\$215.80	\$234.51

Providence - Medical Plan (Wellness Contributions)

Coverage Level	High Deductible with HRA VEBA	High Deductible	Low Deductible
Employee	\$38.13	\$45.18	\$45.20
Employee & Spouse/DP	\$76.26	\$90.36	\$90.40
Employee & Child(ren)	\$68.63	\$81.33	\$81.36
Employee & Family	\$114.39	\$135.55	\$135.60

Providence - Medical Plan (Non-Wellness Contributions)

Coverage Level	High Deductible with HRA VEBA	High Deductible	Low Deductible
Employee	\$76.26	\$90.36	\$90.40
Employee & Spouse/DP	\$152.52	\$180.72	\$180.80
Employee & Child(ren)	\$137.27	\$162.66	\$162.72
Employee & Family	\$228.78	\$271.10	\$271.20

Delta Dental – PPO Dental Plan

Coverage Level	Delta Dental Wellness	Delta Dental Non-Wellness	Kaiser Dental – DHMO Dental Plan Wellness	Kaiser Dental – DHMO Dental Plan Non-Wellness
Employee	\$2.90	\$5.81	\$2.75	\$5.50
Employee & Spouse/DP	\$5.75	\$11.50	\$5.28	\$10.56
Employee & Child(ren)	\$5.98	\$11.96	\$7.70	\$15.39
Employee & Family	\$9.11	\$18.24	\$10.34	\$20.67

VSP – Vision Plan

Coverage Level	VSP - Wellness	VSP - Non-Wellness
Employee	\$0.31	\$0.63
Employee & Spouse/DP	\$0.63	\$1.26
Employee & Child(ren)	\$0.67	\$1.34
Employee & Family	\$1.07	\$2.15

Voluntary Life Plan Costs

Unum Voluntary Life Plan		
Employee Age Employee or Spouse Coverage	Non-Tobacco per \$1,000 of Covered Benefit	Tobacco per \$1,000 of Covered Benefit
24 and under	\$0.055	\$0.084
25 – 29	\$0.06	\$0.084
30 – 34	\$0.08	\$0.09
35 – 39	\$0.09	\$0.119
40 – 44	\$0.124	\$0.191
45 – 49	\$0.217	\$0.326
50 – 54	\$0.334	\$0.502
55 – 59	\$0.572	\$0.829
60 – 64	\$0.683	\$0.989
65 – 69	\$1.311	\$1.835
70 – 74	\$2.36	\$3.185
75 and over	\$3.535	\$4.595
Dependent Child(ren) Rate:	\$0.15	

Calculate your Cost – Voluntary Life

$$\begin{array}{ccccc}
 \$ \underline{\hspace{2cm}} & \times & \underline{\hspace{2cm}} & \div & 1,000 & = & \underline{\hspace{2cm}} \\
 \text{Total Amount of Coverage} & & \text{Rate (from table above)} & & & & \text{Monthly Employee Cost}
 \end{array}$$

HRA VEBA Contributions

The HRA VEBA account is funded with contributions from Washington County and covers employees, legal spouses, and their qualified dependents. The funds in the HRA can be used to reimburse you for qualified out-of-pocket medical care costs, such as copays, deductibles, and prescription drugs. The money in your HRA account rolls over from year to year, to be available when you need it.

Opt-Out Contribution

Benefit eligible employees who choose to waive medical, dental and vision coverage will receive a \$125 monthly contribution into a tax-free HRA VEBA Account. In order to qualify for the Opt Out VEBA contribution from Washington County, you must show proof of other creditable coverage.

High Deductible Plan with HRA VEBA Contribution

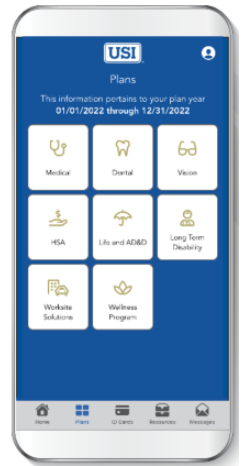
When you choose to enroll in the new **High Deductible Plan with HRA VEBA**, you will receive a monthly contribution into an HRA VEBA Account as follows:

Washington County will contribute monthly:	Kaiser HRA VEBA Contribution	Providence HRA VEBA Contribution
Employee	\$81.72	\$84.85
Employee & Spouse/DP	\$206.59	\$169.69
Employee & Child(ren)	\$147.09	\$152.73
Employee & Family	\$245.15	\$254.54

Additional Resources from USI

USI Mobile App

Washington County is pleased to offer on-the-go access to key benefit information through the USI Mobile App, **MyBenefits2GO**. Download in the App Store or Google Play Store and enter code **W79753** in the app to access your 2025 benefit highlights.



Have Questions? Need Help?

Washington County is excited to offer access to the USI Benefit Resource Center (BRC), which is designed to provide you with a responsive, consistent, hands-on approach to benefit inquiries. Benefit Specialists are available to research and solve elevated claims, unresolved eligibility problems, and any other benefit issues with which you might need assistance. The Benefit Specialists are experienced professionals and their primary responsibility is to assist you.

The Specialists in the Benefit Resource Center are available Monday through Friday 8:00am to 5:00pm, Pacific Time at (866) 468-7272 or via e-mail at BRCWest@usi.com. If you need assistance outside of regular business hours, please leave a message and one of the Benefit Specialists will promptly return your call or e-mail message by the end of the following business day.

A group of nine diverse people of various ages and ethnicities are standing in a line, seen from behind, looking up at a large, colorful speech bubble. The speech bubble is composed of several overlapping circles in shades of blue, purple, pink, orange, and green. Inside the bubble, there are several questions in white text: "Why won't they pay my claim?", "Services denied?!", "How can my claim still be 'in process'? It's been two months!", "I called my insurance carrier, but now I'm just more confused.", and "Do I have mail-order prescription benefits?". At the bottom of the image, there is a blue banner with white text that reads: "Call the County's Benefits Broker, USI – Their Benefit Resource Center ('BRC'), can help!"

Carrier Customer Service

BENEFITS PLAN	CARRIER	PHONE NUMBER	WEBSITE
Benefit Resource Center	USI (Broker)	(866) 468-7272	Email: BRCWest@usi.com
Medical	Providence Health Plan	(503) 574-7500	www.ProvidenceHealthPlan.com
Medical and Dental	Kaiser Permanente	(503) 813-2000	www.kp.org
Dental PPO	Delta Dental	(888) 217-2365	www.DeltaDentalOR.com
Vision	Vision Service Plan (VSP)	(800) 877-7195	www.VSP.com
Life and AD&D	Unum	(800) 445-0402	www.unum.com
Vol. Short Term Disability	Unum	(800) 635-5597	www.unum.com
Long Term Disability	Unum	(800) 858-6843	www.unum.com
Employee Assistance Program (EAP)	Canopy	(800) 433-2320 Text: (503) 850-7721	www.canopywell.com
Flexible Spending Account (FSA)	PacificSource Administrators	(800) 422-7038	www.psa.pacificsource.com
HRA VEBA	HRA VEBA	(888) 659-8828	www.hraveba.org

Human Resources Contact

Please contact Human Resources to complete any changes to your benefits that are not related to your initial or annual enrollment.

HRBenefits@washingtoncountyor.gov or call (503) 846-8686.



