

**Full Time Imputed Income Rates Effective January 1, 2022**

<b>Plan</b>	<b>Domestic Partner</b>	<b>Children of Domestic Partners</b>	<b>Domestic Partner + Children of Domestic Partner</b>	
Kaiser HMO	\$695.51	\$639.09	\$1,334.60	\$1,334.60
Kaiser HMO L6	\$695.51	\$639.09	\$1,334.60	\$1,334.60
Kaiser HMO L26	\$695.51	\$639.09	\$1,334.60	\$1,334.60
Regence PPO	\$935.05	\$712.55	\$1,647.60	\$1,647.60
Regence L6	\$935.05	\$712.55	\$1,647.60	\$1,647.60
Regence L26	\$935.05	\$712.55	\$1,647.60	\$1,647.60
Regence HDHP	\$623.72	\$475.30	\$1,099.02	\$1,099.02
Regence HDHP L6	\$623.72	\$475.30	\$1,099.02	\$1,099.02
Delta Dental	\$63.02	\$53.13	\$116.14	\$116.14
Delta Dental L6	\$63.02	\$53.13	\$116.14	\$116.14
Willamette Dental	\$53.19	\$63.17	\$116.35	\$116.35
Willamette Dental L6	\$53.19	\$63.17	\$116.35	\$116.35
VSP Vision	\$6.45	\$5.99	\$12.44	\$12.44
VSP Vision L6	\$6.45	\$5.99	\$12.44	\$12.44