

## SAIF Corporation

### Imputed Tax Value Calculation

January 1, 2025 through December 31, 2025

Medical/Rx							
Plan	SAIF 2025 Tiered Rates				Imputed Tax Value		
	Employee Only	Employee & Spouse or DP	Employee & Family	Employee & Child(ren)	Partner <sup>1</sup>	Partner & Child(ren) <sup>2</sup>	Child(ren) <sup>3</sup>
Providence PPO Plan - Wellness @ 100% SAIF-paid	\$775.92	\$1,542.63	\$2,367.55	\$1,441.41	<b>\$766.71</b>	<b>\$1,591.63</b>	<b>\$665.49</b>
Providence PPO Plan	\$775.92	\$1,542.63	\$2,367.55	\$1,441.41	<b>\$716.71</b>	<b>\$1,491.63</b>	<b>\$640.49</b>
Kaiser HMO Plan - Wellness @ 100% SAIF-paid	\$829.67	\$1,659.33	\$2,489.00	\$1,493.40	<b>\$829.66</b>	<b>\$1,659.33</b>	<b>\$663.73</b>
Kaiser HMO Plan	\$829.67	\$1,659.33	\$2,489.00	\$1,493.40	<b>\$779.66</b>	<b>\$1,559.33</b>	<b>\$638.73</b>

Dental							
Plan	SAIF 2025 Tiered Rates				Imputed Tax Value		
	Employee Only	Employee & Spouse or DP	Employee & Family	Employee & Child(ren)	Partner <sup>1</sup>	Partner & Child(ren) <sup>2</sup>	Child(ren) <sup>3</sup>
Delta Dental @ 100% SAIF-paid	\$55.73	\$110.29	\$174.92	\$114.76	<b>\$54.56</b>	<b>\$119.19</b>	<b>\$59.03</b>
Willamette Dental Group @ 100% SAIF-paid	\$46.20	\$91.45	\$145.00	\$95.10	<b>\$45.25</b>	<b>\$98.80</b>	<b>\$48.90</b>
Kaiser DHMO	\$106.65	\$211.12	\$334.83	\$219.69	<b>\$54.56</b>	<b>\$119.19</b>	<b>\$59.03</b>
Kaiser PPO Dental @ 100% SAIF-paid	\$53.66	\$107.32	\$160.98	\$96.64	<b>\$53.66</b>	<b>\$107.32</b>	<b>\$42.98</b>

Vision							
Plan	SAIF 2025 Tiered Rates				Imputed Tax Value		
	Employee Only	Employee & Spouse or DP	Employee & Family	Employee & Child(ren)	Partner <sup>1</sup>	Partner & Child(ren) <sup>2</sup>	Child(ren) <sup>3</sup>
VSP Vision Base Plan @ 100% SAIF-paid	\$7.23	\$13.42	\$22.20	\$14.25	<b>\$6.19</b>	<b>\$14.97</b>	<b>\$7.02</b>
VSP Vision Buy-Up Plan	\$13.35	\$25.69	\$43.21	\$27.42	<b>\$6.19</b>	<b>\$14.97</b>	<b>\$7.02</b>

**Note: The value of the coverage for a domestic partner and/or any dependents of the domestic partner are taxable as "imputed income." Since pre-tax dollars are used to pay the employee's share of premium, the total premium is used when calculating the imputed income for covering a domestic partner and/or the children of that partner.**

<sup>1</sup>Imputed value for Partner = Employee & Spouse - Employee Only rate.

<sup>2</sup>Imputed value for Partner & Child(ren) = Employee & Family rate - Employee Only rate.

<sup>3</sup>Imputed value for Partner's Child(ren) = Employee & Child(ren) rate - Employee Only rate. **Imputed rate does not apply if employee also has non-DP children enrolled.**

The following grid illustrates the federal tax and Oregon state income tax guidelines for the tax treatment of eligible dependents (adult & child) covered on the SAIF health plan for same sex legal marriages and registered domestic partnerships (RDP) in Oregon.			Oregon Income Tax Rules: these rules imply that the imputed value of group health coverage provided to an Oregon RDP is included in the employee's wages. The employee then claims the tax credit when filing his/her Oregon income tax return. The value of the coverage provided to the RDP is not considered tax-free for employer's reporting purposes.
	Tax free benefit - Federal (employer tax purposes)	Tax free benefit - Oregon State income tax (employer tax purposes)	
	Yes	No	
	No	See Oregon Income tax Rules →	
Legally married, not Oregon RDP	Yes	Yes	
Oregon RDP, not legally married	No		
Legally married & Oregon RDP	Yes		