

LICENSED 2022-2023 INSURANCE UNIT RATES

Medical Plans

| | Kaiser Medical/Pharmacy Plan 1 | Kaiser Medical/Pharmacy Plan 2A | Kaiser Medical/Pharmacy Plan 2B | Kaiser Medical/Pharmacy Plan 3 HSA Compatible | | | |
|----------------------------------|-----------------------------------|-------------------------------------|--------------------------------------|---|--------------------------------------|--------------------------------------|--------------------------------------|
| | No Deductible* \$1,500 OOP* | \$800 Deductible* \$4,000 OOP* | \$1,200 Deductible* \$4,500 OOP* | \$1,600 Deductible* \$6,550 OOP* | | | |
| | \$1,577.61 | \$1,309.30 | \$1,267.93 | \$962.48 | | | |
| | Moda Plan 1 | Moda Plan 2 | Moda Plan 3 | Moda Plan 4 | Moda Plan 5 | Moda Plan 6 HSA Compatible | Moda Plan 7 HSA Compatible |
| Coordinated Care Member Pays | \$400 Deductible* \$2,850 OOP* | \$800 Deductible* \$3,850 OOP* | \$1200 Deductible* \$4,850 OOP* | \$1,600 Deductible* \$6,700 OOP* | \$2,000 Deductible* \$6,800 OOP* | \$1,600 Deductible* \$6,400 OOP* | \$2,000 Deductible* \$6,500 OOP* |
| Non-Coordinated Care Member Pays | \$500 Deductible* \$3,250 OOP* | \$900 Deductible* \$4,250 OOP* | \$1,300 Deductible* \$5,250 OOP* | \$1,700 Deductible* \$7,100 OOP* | \$2,100 Deductible* \$7,200 OOP* | \$1,700 Deductible* \$6,750 OOP* | \$2,100 Deductible* \$6,750 OOP* |
| Out-of-Network Member Pays | \$800 Deductible* \$6,000 OOP* | \$1,600 Deductible* \$8,000 OOP* | \$2,400 Deductible* \$10,000 OOP* | \$3,200 Deductible* \$13,700 OOP* | \$4,000 Deductible* \$13,700 OOP* | \$3,200 Deductible* \$13,100 OOP* | \$4,000 Deductible* \$13,300 OOP* |
| Monthly premium | \$1,761.90 | \$1,634.42 | \$1,533.39 | \$1,447.88 | \$1,337.47 | \$1,364.28 | \$1,273.28 |

Non-coordinated plans result in higher deductible and higher out-of-pocket maximums. The premiums are the same.

- *Deductible Per person, see webpage for family deductible
- *OOP Out of Pocket Maximum (per person; see webpage for family deductible)
- *Bene Max Plan year benefit maximum (per person)

Dental Plans

| Kaiser Dental Plan | Delta Dental 1 w/ortho | Delta Dental 5 w/ortho | Delta Dental Premier 6 No ortho | Delta Dental -PPO Incentive Plan | Delta Dental - Exclusive PPO Plan | Willamette Dental |
|--|--|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------|
| No Deductible* \$4,000 Bene Max* \$20.00 copay | \$50 Deductible* \$2,200 Bene Max* | \$50 Deductible* \$1,700 Bene Max* | \$50 Deductible* \$1,200 Bene Max* | \$50 Deductible* \$2,300 Bene Max* | \$50 Deductible* \$1,500 Bene Max* | NA NA \$20.00 copay |
| | Refer to Benefit Summary for differences | | | | | |
| \$174.03 | \$157.59 | \$139.20 | \$100.46 | \$136.61 | \$92.06 | \$119.53 |

Vision Plans

| Kaiser Vision Plan | Moda Vision Opal | Moda Vision Pearl | Moda Vision Quartz | VSP Choice Plus Plan | VSP Choice Plan |
|--------------------|------------------|-------------------|--------------------|----------------------|-----------------|
| \$250 Ben Max* | \$600 Bene Max* | \$400 Bene Max* | \$250 Bene Max* | N/A | N/A |
| \$19.70 | \$51.65 | \$42.23 | \$29.80 | \$39.71 | \$19.31 |

| | | |
|---|--|--|
| <u>Long-Term Disability</u> Standard Plan 18 Composite Rate TBD | <u>Life Insurance</u> Standard Plan 3 \$1.04 | <u>Employee Assistance Program</u> Reliant Behavioral Health 6 sessions Paid by District |
|---|--|--|

For guidance in deciding which plan(s) work best for your family please feel free to schedule an appointment with American Fidelity (503-718-7040).

Worksheet

| | | |
|------------------|---|-------|
| Medical Premium | + | _____ |
| Dental Premium | + | _____ |
| Vision Premium | + | _____ |
| Total Premium | + | _____ |
| Minus Cap | | _____ |
| Employee Premium | | _____ |

All Plan information is located at url:

www.oregon.gov/oha/oebb

If Employee Premium is negative, multiply amount by 67%. This is your Section 125 benefit and/or salary adjustment amount

If Total Premium is more than the cap, then the Difference = Out of Pocket (monthly payroll deduction)