

**2018-2019 MONTHLY INSURANCE PREMIUMS
FOR
LICENSED EMPLOYEES**

Unit Rates 2018-2019						
Medical Plans	PPO/Connexus Premium	SYNERGY Premium	Dental Plans	Premium	Vision Plans	Premium
Moda Plan Birch w/Rx	\$1,524.27	\$1,371.83	Delta Dental Plan 1 w/Ortho	\$160.73	Moda Plan Opal	\$52.64
Moda Plan Cedar w/Rx	\$1,412.51	\$1,271.27	Delta Dental Plan 5 w/Ortho	\$141.85	Moda Plan Pearl	\$43.02
Moda Plan Dogwood w/ HRA	\$1,404.08	\$1,263.30	Delta Dental Plan 6 (No Ortho)	\$100.31	Moda Plan Quartz	\$30.37
			Delta Dental Excl PPO w/Ortho	\$94.83	VSP Choice Plus	\$45.13
Kaiser Plan 1 w/Rx	\$1,502.02	N/A			VSP Choice	\$21.94
Kaiser Plan 2 w/Rx	\$1,244.15	N/A	Willamette Dental w/Ortho	\$115.89	Kaiser Vision Plan	\$19.42
Kaiser Plan 3 w/ HRA	\$1,085.14	N/A	Kaiser Dental w/Ortho	\$167.79		
					*Must have Kaiser medical to get vision	

**2018-2019 Cap = \$1,445.00/month (\$1,375 District Cap + \$70 FGEA Contribution) for 1.0 FTE licensed employees
\$1,445.00 pro-rated * FTE/month for < 1.0 FTE licensed employees**