

**Caldwell School District  
2018-2019 Benefit Rates**

	Total Premium	District Paid	Employer Contribution to HS Account**	Employee Monthly Deduction
<b>Medical - Blue Cross Economy Plan with Health Savings Account (w/Enhanced Rx)</b>				
Employee Only	447.25	440.60	55.00	6.65
Employee + Spouse	846.95	440.60	55.00	406.35
Employee + 1 Child	622.95	440.60	55.00	182.35
Employee + Children	723.95	440.60	55.00	283.35
Family	1,005.05	440.60	55.00	564.45
2 Employee No Dep	846.95	416.83/416.82	55.00	6.65/6.65
2 Employee Family	1,005.05	416.83/416.82	55.00	85.70/85.70
** Contribution amount may be applied to dependent premiums or deposited in Health Savings Account.				
<b>Medical - Blue Cross Standard Plan</b>				
Employee Only	510.90	495.60		15.30
Employee + Spouse	973.75	495.60		478.15
Employee + 1 Child	699.00	495.60		203.40
Employee + Children	805.85	495.60		310.25
Family	1,131.45	495.60		635.85
2 Employee No Dep	973.75	471.57/471.58		15.30/15.30
2 Employee Family	1,131.45	471.57/471.58		94.15/94.15
<b>Dental - Blue Cross PPO</b>				
Employee Only	30.55	30.55		<b>0.00</b>
Employee + Spouse	61.65	30.55		31.10
Employee + 1 Child	61.65	30.55		31.10
Employee + Children	112.50	30.55		81.95
Family	112.50	30.55		81.95
2 Employee No Dep	61.65	30.83/30.82		0.00/0.00
2 Employee Family	112.50	30.83/30.83		25.42/25.42
<b>Dental - Willamette</b>				
Employee Only	40.59	30.55		10.04
Employee + Spouse	81.21	30.55		50.66
Employee + 1 Child	81.21	30.55		50.66
Employee + Children	147.51	30.55		116.96
Family	147.51	30.55		116.96
2 Employee No Dep	81.21	30.83/30.82		9.78/9.78
2 Employee Family	147.51	30.83/30.82		42.93/42.93
<b>Vision - United Heritage</b>				
Employee Only	7.88	7.88		<b>0.00</b>
Employee + Spouse	11.83	7.88		3.95
Employee + 1 Child	11.83	7.88		3.95
Employee + Children	11.83	7.88		3.95
Family	20.86	7.88		12.98
2 Employee No Dep	11.83	5.92/5.91		0.00/0.00
2 Employee Family	20.86	5.92/5.92		4.51/4.51
<b>Employee Assistance Plan - Reliant Behavioral Health</b>				
Employee Household	2.30	2.30		<b>0.00</b>
<b>Life Insurance - United Heritage</b>				
\$50,000 Life-Employee Only	7.00	7.00		<b>0.00</b>
<b>FSA and HSA Administration - AmeriFlex</b>				
Flex Spending Account				3.50
Health Savings Account				3.50