

North Clackamas School District Insurance Contribution Rates for Classified Employees 1/1/2023

To determine your monthly premium, select a plan from the left side of the page, find the row below that reflects the daily number of hours you work, then track over to the appropriate premium under the column header 'Employee Pays'. Single rate covers Employee only. Two-party rate covers the employee plus one. Family rate covers employee plus two or more. The dollar amount shown in the 'Employee Pays' column is your monthly pre-tax premium for each coverage selected. Premiums are deducted from payroll the pay date in advance of the coverage month. In some cases, this requires that more than one premium will be deducted from your check. (This "pick up premium" or adjustment generally applies to first time enrollees.) If enrolling a Domestic Partner a signed affidavit and taxation adjustments are required.

Medical	<u>Single Premiums</u>			<u>Two-Party Premiums</u>			<u>Family Premiums</u>		
	<u>Employee %</u>	<u>Employee Pays</u>	<u>District Pays</u>	<u>Employee %</u>	<u>Employee Pays</u>	<u>District Pays</u>	<u>Employee %</u>	<u>Employee Pays</u>	<u>District Pays</u>
NC Plan V - HMA (VISION EXCLUDED) <i>Regence Preferred Provider, Deductible</i> Hours FTE 7.5 to 8 0.9375-1.0 6 to 7.49 0.75-0.93625 4 to 5.99 0.5-0.74875	\$1,770.26			\$1,770.26			\$1,770.26		
	3.00%	\$ 53.11	\$ 1,717.15	8.00%	\$ 141.62	\$ 1,628.64	12.00%	\$ 212.43	\$ 1,557.83
	5.00%	\$ 88.51	\$ 1,681.75	10.00%	\$ 177.03	\$ 1,593.23	37.00%	\$ 655.00	\$ 1,115.26
	5.00%	\$ 88.51	\$ 1,681.75	26.00%	\$ 460.27	\$ 1,309.99	73.00%	\$ 1,292.29	\$ 477.97
NC Plan 1x - HMA (VISION EXCLUDED) <i>Regence Preferred Provider, No Deductible</i> 7.5 to 8 0.9375-1.0 6 to 7.49 0.75-0.93625 4 to 5.99 0.5-0.74875	\$2,389.67			\$2,389.67			\$2,389.67		
	3.00%	\$ 547.52	\$ 1,842.15	8.00%	\$ 511.03	\$ 1,878.64	12.00%	\$ 581.84	\$ 1,807.83
	5.00%	\$ 582.92	\$ 1,806.75	10.00%	\$ 546.44	\$ 1,843.23	37.00%	\$ 1,024.41	\$ 1,365.26
	5.00%	\$ 582.92	\$ 1,806.75	26.00%	\$ 829.68	\$ 1,559.99	73.00%	\$ 1,661.70	\$ 727.97
Kaiser - Traditional "TRAD" <i>(Vision INCLUDED)</i> 7.5 to 8 0.9375-1.0 6 to 7.49 0.75-0.93625 4 to 5.99 0.5-0.74875	\$1,622.02			\$1,622.02			\$1,622.02		
	3.00%	\$ 48.66	\$ 1,573.36	8.00%	\$ 129.76	\$ 1,492.26	12.00%	\$ 194.64	\$ 1,427.38
	5.00%	\$ 81.10	\$ 1,540.92	10.00%	\$ 162.20	\$ 1,459.82	37.00%	\$ 600.15	\$ 1,021.87
	5.00%	\$ 81.10	\$ 1,540.92	26.00%	\$ 421.73	\$ 1,200.29	73.00%	\$ 1,184.07	\$ 437.95
Kaiser High-Deductible "HDHP" <i>(VISION NOT INCLUDED)</i> 7.5 to 8 0.9375-1.0 6 to 7.49 0.75-0.93625 4 to 5.99 0.5-0.74875	\$428.37			\$856.74			\$1,156.60		
	3.00%	\$ 12.85	\$ 415.52	8.00%	\$ 68.54	\$ 788.20	12.00%	\$ 138.79	\$ 1,017.81
	5.00%	\$ 21.42	\$ 406.95	10.00%	\$ 85.67	\$ 771.07	37.00%	\$ 427.94	\$ 728.66
	5.00%	\$ 21.42	\$ 406.95	26.00%	\$ 222.75	\$ 633.99	73.00%	\$ 844.32	\$ 312.28
Dental	<u>Single Premiums</u>			<u>Two-Party Premiums</u>			<u>Family Premiums</u>		
	<u>Employee %</u>	<u>Employee Pays</u>	<u>District Pays</u>	<u>Employee %</u>	<u>Employee Pays</u>	<u>District Pays</u>	<u>Employee %</u>	<u>Employee Pays</u>	<u>District Pays</u>
North Clackamas - HMA Hours FTE 7.5 to 8 0.9375-1.0 6 to 7.49 0.75-0.93625 4 to 5.99 0.5-0.74875	\$134.14			\$134.14			\$134.14		
	3.00%	\$ 4.02	\$ 130.12	8.00%	\$ 10.73	\$ 123.41	12.00%	\$ 16.10	\$ 118.04
	5.00%	\$ 6.71	\$ 127.43	10.00%	\$ 13.41	\$ 120.73	37.00%	\$ 49.63	\$ 84.51
	5.00%	\$ 6.71	\$ 127.43	26.00%	\$ 34.88	\$ 99.26	73.00%	\$ 97.92	\$ 36.22
Kaiser 7.5 to 8 0.9375-1.0 6 to 7.49 0.75-0.93625 4 to 5.99 0.5-0.74875	\$175.73			\$175.73			\$175.73		
	3.00%	\$ 5.27	\$ 170.46	8.00%	\$ 14.06	\$ 161.67	12.00%	\$ 21.09	\$ 154.64
	5.00%	\$ 8.79	\$ 166.94	10.00%	\$ 17.57	\$ 158.16	37.00%	\$ 65.02	\$ 110.71
	5.00%	\$ 8.79	\$ 166.94	26.00%	\$ 45.69	\$ 130.04	73.00%	\$ 128.28	\$ 47.45
Vision	<u>Single Premiums</u>			<u>Two-Party Premiums</u>			<u>Family Premiums</u>		
	<u>Employee %</u>	<u>Employee Pays</u>	<u>District Pays</u>	<u>Employee %</u>	<u>Employee Pays</u>	<u>District Pays</u>	<u>Employee %</u>	<u>Employee Pays</u>	<u>District Pays</u>
North Clackamas - HMA Hours FTE 7.5 to 8 0.9375-1.0 6 to 7.49 0.75-0.93625 4 to 5.99 0.5-0.74875	\$28.22			\$28.22			\$28.22		
	3.00%	\$ 0.85	\$ 27.37	8.00%	\$ 2.26	\$ 25.96	12.00%	\$ 3.39	\$ 24.83
	5.00%	\$ 1.41	\$ 26.81	10.00%	\$ 2.82	\$ 25.40	37.00%	\$ 10.44	\$ 17.78
	5.00%	\$ 1.41	\$ 26.81	26.00%	\$ 7.34	\$ 20.88	73.00%	\$ 20.60	\$ 7.62