Oak Grove School District
Medical Premiums - Effective 01/01/2026
Monthly Rate Sheet - New Contract Rates
AFSCME

Coverage Level		Anthem Blue Cross Select	Anthem Blue Cross Traditional	Blue Shield Access	Kaiser Permanente	United Healthcare Signature Value Alliance	United Healthcare Signature Value Harmony	PERS Gold PPO	PERS Platinum PPO
Employee Only	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$1,336.29	$1,612.08	$1,301.95	$1,168.86	$1,290.06	$1,133.09	$1,120.58	$1,670.14
	District contibution*	$1,083.25	$1,083.25	$1,083.25	$1,082.46	$1,083.25	$1,083.25	$1,120.58	$1,162.93
	Employee portion**	**$253.04**	**$528.83**	**$218.70**	**$86.40**	**$206.81**	**$49.84**	**$0.00**	**$507.21**
Employee + one dependent	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$2,672.58	$3,224.16	$2,603.90	$2,337.72	$2,580.12	$2,266.18	$2,241.16	$3,340.28
	District contibution*	$1,223.51	$1,223.51	$1,223.51	$1,216.49	$1,223.51	$1,223.51	$1,343.54	$1,377.43
	Employee portion**	**$1,449.07**	**$2,000.65**	**$1,380.39**	**$1,121.23**	**$1,356.61**	**$1,042.67**	**$897.62**	**$1,962.85**
Employee + two or more dependents	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$3,474.35	$4,191.41	$3,385.07	$3,039.04	$3,354.16	$2,946.03	$2,913.51	$4,342.36
	District contibution*	$1,534.09	$1,534.09	$1,534.09	$1,522.88	$1,534.09	$1,534.09	$1,669.30	$1,713.38
	Employee portion**	**$1,940.26**	**$2,657.32**	**$1,850.98**	**$1,516.16**	**$1,820.07**	**$1,411.94**	**$1,244.21**	**$2,628.98**

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Oak Grove School District
Medical Premiums - Effective 01/01/2026
Monthly Rate Sheet - New Contract Rates
CSEA

Coverage Level		Anthem Blue Cross Select	Anthem Blue Cross Traditional	Blue Shield Access	Kaiser Permanente	United Healthcare Signature Value Alliance	United Healthcare Signature Value Harmony	PERS Gold PPO	PERS Platinum PPO
Employee Only	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$1,336.29	$1,612.08	$1,301.95	$1,168.86	$1,290.06	$1,133.09	$1,120.58	$1,670.14
	District contibution*	$1,336.29	$1,360.15	$1,301.95	$1,168.86	$1,290.06	$1,133.09	$1,120.58	$1,670.14
	Employee portion**	**$0.00**	**$251.93**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**
Employee + one dependent	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$2,672.58	$3,224.16	$2,603.90	$2,337.72	$2,580.12	$2,266.18	$2,241.16	$3,340.28
	District contibution*	$2,123.69	$2,123.69	$2,123.69	$2,116.67	$2,123.69	$2,123.69	$2,107.81	$2,151.70
	Employee portion**	**$548.89**	**$1,100.47**	**$480.21**	**$221.05**	**$456.43**	**$142.49**	**$133.35**	**$1,188.58**
Employee + two or more dependents	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$3,474.35	$4,191.41	$3,385.07	$3,039.04	$3,354.16	$2,946.03	$2,913.51	$4,342.36
	District contibution*	$2,515.95	$2,515.95	$2,515.95	$2,504.74	$2,515.95	$2,515.95	$2,515.26	$2,559.34
	Employee portion**	**$958.40**	**$1,675.46**	**$869.12**	**$534.30**	**$838.21**	**$430.08**	**$398.25**	**$1,783.02**

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Oak Grove School District
Medical Premiums - Effective 01/01/2026
Monthly Rate Sheet - New Contract Rates
OGEA

Coverage Level		Anthem Blue Cross Select	Anthem Blue Cross Traditional	Blue Shield Access	Kaiser Permanente	United Healthcare Signature Value Alliance	United Healthcare Signature Value Harmony	PERS Gold PPO	PERS Platinum PPO
Employee Only	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$1,336.29	$1,612.08	$1,301.95	$1,168.86	$1,290.06	$1,133.09	$1,120.58	$1,670.14
	District contibution*	$1,199.35	$1,199.35	$1,199.35	$1,112.62	$1,199.35	$1,133.09	$1,120.58	$1,559.10
	Employee portion**	**$136.94**	**$412.73**	**$102.60**	**$56.24**	**$90.71**	**$0.00**	**$0.00**	**$111.04**
Employee + one dependent	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$2,672.58	$3,224.16	$2,603.90	$2,337.72	$2,580.12	$2,266.18	$2,241.16	$3,340.28
	District contibution*	$2,270.51	$2,270.51	$2,270.51	$2,103.70	$2,270.51	$2,266.18	$2,241.16	$2,535.89
	Employee portion**	**$402.07**	**$953.65**	**$333.39**	**$234.02**	**$309.61**	**$0.00**	**$0.00**	**$804.39**
Employee + two or more dependents	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$3,474.35	$4,191.41	$3,385.07	$3,039.04	$3,354.16	$2,946.03	$2,913.51	$4,342.36
	District contibution*	$2,479.06	$2,479.06	$2,479.06	$2,735.89	$2,479.06	$2,479.06	$2,614.27	$2,658.35
	Employee portion**	**$995.29**	**$1,712.35**	**$906.01**	**$303.15**	**$875.10**	**$466.97**	**$299.24**	**$1,684.01**

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Oak Grove School District
Medical Premiums - Effective 01/01/2026
Monthly Rate Sheet - New Contract Rates
OGMA

Coverage Level		Anthem Blue Cross Select	Anthem Blue Cross Traditional	Blue Shield Access	Kaiser Permanente	United Healthcare Signature Value Alliance	United Healthcare Signature Value Harmony	PERS Gold PPO	PERS Platinum PPO
Employee Only	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$1,336.29	$1,612.08	$1,301.95	$1,168.86	$1,290.06	$1,133.09	$1,120.58	$1,670.14
	District contibution*	$1,130.35	$1,130.35	$1,130.35	$1,072.21	$1,130.35	$1,130.35	$1,120.58	$1,333.24
	Employee portion**	**$205.94**	**$481.73**	**$171.60**	**$96.65**	**$159.71**	**$2.74**	**$0.00**	**$336.90**
Employee + one dependent	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$2,672.58	$3,224.16	$2,603.90	$2,337.72	$2,580.12	$2,266.18	$2,241.16	$3,340.28
	District contibution*	$2,180.55	$2,180.55	$2,180.55	$2,078.70	$2,180.55	$2,180.55	$2,241.16	$2,334.47
	Employee portion**	**$492.03**	**$1,043.61**	**$423.35**	**$259.02**	**$399.57**	**$85.63**	**$0.00**	**$1,005.81**
Employee + two or more dependents	2025 Rate	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
	2026 Rate	$3,474.35	$4,191.41	$3,385.07	$3,039.04	$3,354.16	$2,946.03	$2,913.51	$4,342.36
	District contibution*	$2,814.61	$2,814.61	$2,814.61	$2,803.40	$2,814.61	$2,814.61	$2,913.51	$2,993.90
	Employee portion**	**$659.74**	**$1,376.80**	**$570.46**	**$235.64**	**$539.55**	**$131.42**	**$0.00**	**$1,348.46**

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