



Non-Represented Employees Monthly Costs for 10/1/26 to 9/30/27



2026 -
2027

OPT-OUT - Full-time employees with other employer sponsored health coverage, Tricare, or Medicare may opt out of health benefits and receive a taxable amount of \$400 per month. For more information, please visit: <https://www.pps.net/departments/human-resources/benefits/opt-out-incentive>

Moda Medical Plan 6 and Kaiser Medical Plan 3 and Health Savings Account (HSA)

Full-time employees enrolling in Moda Medical Plan 6 or Kaiser Medical Plan 3 are eligible for an optional district contribution (shown on the right) to their HSA. If you are dual covered under another medical plan, including Medicare, please email benefits@pps.net as you may not be eligible for the HSA.

Monthly District Contribution to HSA

EE Only	EE+ Child(ren)	EE+ Spouse	Family
\$175	\$300	\$300	\$300

NEW for 2026-2027 Moda Medical Plan 5 and Kaiser Medical Plan 2B

Full-time AND Part-time employees enrolling in Moda Medical Plan 5 or Kaiser Medical Plan 2b are eligible to participate in the PPS Health Reimbursement Arrangement. Please see additional details in your enrollment materials.

Active Full-Time Employees - 30+ hours per week

Medical and Vision	Dental	EE Only	EE+ Child(ren)	EE+ Spouse	Family
Moda Medical Plan 6 & VSP Vision -HSA eligible-	Delta Dental Plan 6 No Ortho	\$62	\$117	\$132	\$177
	Delta Dental Plan 5 w/ Ortho	\$63	\$120	\$134	\$181
	Kaiser Dental Plan 8 w/ Ortho	\$64	\$120	\$137	\$184
New plan for 26-27 Moda Medical Plan 5 & VSP Vision -HRA eligible-	Delta Dental Plan 6 No Ortho	\$49	\$95	\$109	\$153
	Delta Dental Plan 5 w/ Ortho	\$50	\$98	\$111	\$157
	Kaiser Dental Plan 8 w/ Ortho	\$51	\$98	\$114	\$160
Moda Medical Plan 1 & VSP Vision	Delta Dental Plan 6 No Ortho	\$64	\$122	\$140	\$198
	Delta Dental Plan 5 w/ Ortho	\$65	\$125	\$142	\$202
	Kaiser Dental Plan 8 w/ Ortho	\$66	\$125	\$145	\$205

Kaiser Medical Plan 3 & VSP Vision -HSA eligible-	Delta Dental Plan 6 No Ortho	\$51	\$96	\$107	\$142
	Delta Dental Plan 5 w/ Ortho	\$52	\$99	\$109	\$146
	Kaiser Dental Plan 8 w/ Ortho	\$53	\$99	\$112	\$149
New plan for 26-27 Kaiser Medical Plan 2B & VSP Vision -HRA Eligible-	Delta Dental Plan 6 No Ortho	\$49	\$95	\$108	\$153
	Delta Dental Plan 5 w/ Ortho	\$50	\$98	\$110	\$157
	Kaiser Dental Plan 8 w/ Ortho	\$51	\$98	\$113	\$160
Kaiser Medical Plan 1 & VSP Vision	Delta Dental Plan 6 No Ortho	\$57	\$109	\$126	\$177
	Delta Dental Plan 5 w/ Ortho	\$58	\$112	\$128	\$181
	Kaiser Dental Plan 8 w/ Ortho	\$59	\$112	\$131	\$184

Active Part-Time Employees - 20 to 29 hours per week

Medical and Vision	Dental	EE Only	EE+ Child(ren)	EE+ Spouse	Family
Moda Medical Plan 1 & VSP Vision	Delta Dental Plan 5 w/ Ortho	\$92	\$713	\$811	\$1,154
	Kaiser Dental Plan 8 w/ Ortho	\$94	\$717	\$830	\$1,169
New plan for 26-27 Moda Medical Plan 5 & VSP Vision -HRA eligible-	Delta Dental Plan 5 w/ Ortho	\$71	\$540	\$619	\$877
	Kaiser Dental Plan 8 w/ Ortho	\$74	\$561	\$650	\$915
Kaiser Medical Plan 1 & VSP Vision	Delta Dental Plan 5 w/ Ortho	\$83	\$713	\$728	\$1,037
	Kaiser Dental Plan 8 w/ Ortho	\$85	\$717	\$747	\$1,052
New plan for 26-27 Kaiser Medical Plan 2B & VSP Vision -HRA Eligible-	Delta Dental Plan 5 w/ Ortho	\$71	\$539	\$618	\$876
	Kaiser Dental Plan 8 w/ Ortho	\$74	\$560	\$649	\$914

All plans include district paid life insurance (2x your annual salary) and Long Term Disability coverage.