

DISTRICT CAPS 2019 - 2020

All Other Bargaining Units

| TIER | 12-MTH |
|------------------|------------|
| Employee Only | \$618.00 |
| Emp + Spouse | \$1,349.00 |
| Emp + Child(ren) | \$1,180.00 |
| Family | \$1,914.00 |

2019 - 2020 MONTHLY PREMIUMS

Medical & Pharmacy

| TIER | Plan 2 | Plan 3 | Plan 4 | Plan 5 | Plan 6 | Plan 7 |
|------------------|------------|------------|------------|------------|------------|------------|
| Employee Only | \$631.05 | \$593.23 | \$562.96 | \$520.55 | \$533.09 | \$497.53 |
| Emp + Spouse | \$1,388.30 | \$1,305.10 | \$1,238.52 | \$1,145.21 | \$1,172.79 | \$1,094.57 |
| Emp + Child(ren) | \$1,199.01 | \$1,127.17 | \$1,069.66 | \$989.06 | \$1,012.89 | \$945.33 |
| Family | \$1,956.28 | \$1,839.05 | \$1,745.23 | \$1,613.73 | \$1,652.61 | \$1,542.38 |

Medical & Pharmacy - Select

Rates apply only to members whose enrollment in OEBB between June 2019 and September 2019 was in a Moda CCM Synergy/Summit plan.

| TIER | Plan 2 | Plan 3 | Plan 4 | Plan 5 | Plan 6 | Plan 7 |
|------------------|------------|------------|------------|------------|------------|------------|
| Employee Only | \$631.05 | \$587.82 | \$495.69 | \$444.62 | \$499.12 | \$482.91 |
| Emp + Spouse | \$1,388.30 | \$1,293.22 | \$1,090.51 | \$978.14 | \$1,098.04 | \$1,062.39 |
| Emp + Child(ren) | \$1,199.01 | \$1,116.88 | \$941.83 | \$844.77 | \$948.33 | \$917.53 |
| Family | \$1,956.28 | \$1,822.31 | \$1,536.66 | \$1,378.31 | \$1,547.27 | \$1,497.03 |

| TIER | DENT 5 | DENT 6 | DELTA DENT PPO | WILL DENT | V - OPAL | VSP - CP |
|------------------|----------|----------|----------------|-----------|----------|----------|
| Employee Only | \$58.67 | \$43.89 | \$39.22 | \$47.39 | \$24.26 | \$18.80 |
| Emp + Spouse | \$116.22 | \$86.90 | \$77.70 | \$93.88 | \$53.33 | \$41.37 |
| Emp + Child(ren) | \$129.25 | \$88.20 | \$86.40 | \$99.90 | \$46.03 | \$35.73 |
| Family | \$191.41 | \$134.74 | \$127.96 | \$150.09 | \$75.14 | \$58.29 |