

## **Non-Represented Employees** Monthly Costs for 10/1/24 to 9/30/25



2024 -2025

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: www.pps.net/page/1636

| 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  | Monthly District Contribution to HSA |                   |               |        |  |  |
|   |                                      | EE+<br>Child(ren) | EE+<br>Spouse | Family |  |  |
| another medical plan, including Medicare, please email benefits@pps.net as you may not be eligible for the HSA. | 175                                  |                   |               | 300    |  |  |

| Active Full-Time Employees - 30+ hours per week     |                               |         |            |        |        |  |  |
|---|-------------------------------|---------|------------|--------|--------|--|--|
| Medical and Vision                                  | Dental                        | EE Only | EE+        | EE+    | Family |  |  |
|   |                               |         | Child(ren) | Spouse |        |  |  |
| Moda Medical Plan 6 & VSP<br>Vision *HSA eligible   | Delta Dental Plan 6 No Ortho  | 59      | 111        | 124    | 167    |  |  |
|   | Delta Dental Plan 5 w/ Ortho  | 60      | 114        | 126    | 171    |  |  |
|   | Kaiser Dental Plan 8 w/ Ortho | 61      | 115        | 129    | 173    |  |  |
| Moda Medical Plan 1 & VSP<br>Vision                 | Delta Dental Plan 6 No Ortho  | 60      | 113        | 130    | 185    |  |  |
|   | Delta Dental Plan 5 w/ Ortho  | 61      | 116        | 132    | 189    |  |  |
|   | Kaiser Dental Plan 8 w/ Ortho | 62      | 117        | 135    | 191    |  |  |
| Kaiser Medical Plan 3 & VSP<br>Vision *HSA eligible | Delta Dental Plan 6 No Ortho  | 47      | 87         | 97     | 130    |  |  |
|   | Delta Dental Plan 5 w/ Ortho  | 48      | 90         | 99     | 134    |  |  |
|   | Kaiser Dental Plan 8 w/ Ortho | 49      | 91         | 102    | 136    |  |  |
| Kaiser Medical Plan 1 & VSP<br>Vision               | Delta Dental Plan 6 No Ortho  | 55      | 104        | 119    | 170    |  |  |
|   | Delta Dental Plan 5 w/ Ortho  | 56      | 107        | 121    | 174    |  |  |
|   | Kaiser Dental Plan 8 w/ Ortho | 57      | 108        | 124    | 176    |  |  |

| Active Part-Time Employees - 20 to 29 hours per week |                               |           |            |        |           |  |  |  |
|--|-------------------------------|-----------|------------|--------|-----------|--|--|--|
| Medical and Vision                                   | Dental                        | FF Only   | EE+        | EE+    | Family    |  |  |  |
| Wedical and Vision                                   | Deritai                       | LL Offiny | Child(ren) | Spouse | l allilly |  |  |  |
| Moda Medical Plan 1 & VSP                            | Delta Dental Plan 5 w/ Ortho  | 87        | 667        | 758    | 1079      |  |  |  |
| Vision   | Kaiser Dental Plan 8 w/ Ortho | 88        | 670        | 776    | 1092      |  |  |  |
| Kaiser Medical Plan 1 & VSP                          | Delta Dental Plan 5 w/ Ortho  | 80        | 667        | 695    | 990       |  |  |  |
| Vision   | Kaiser Dental Plan 8 w/ Ortho | 81        | 670        | 713    | 1003      |  |  |  |

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