

## 2. Compensation

### 2.1 Compensation Package

#### 2.1.3.e. Health Plan 2022-2023

<u>MEDICAL</u> – SelectHealth (3 Options - Employee to choose one)			
<i>Network</i>	BrightPath St. Luke's	BrightPath St. Luke's	BrightPath St. Luke's
<i>Plan Name</i>	Signature 350	Signature 1250	HSA 2000
<i>Co-Payment (Pri/Spec)</i>	\$20 / \$30	\$30 / \$45	\$15 / \$25 after Ded
<i>Deductible (Ind/Fam)</i>	\$350 / \$700	\$1,250 / \$2,500	\$2,000 / \$4,000
<i>Co-Insurance (Carrier Pays) (In/Out)</i>	80% / 60%	80% / 60%	80% / 60%
<i>Max OOP (Ind/Fam)</i>	\$3,000 / \$6,000	\$4,000 / \$8,000	\$4,000 / \$8,000
<i>Rx Deductible</i>	\$0	\$250	Integrated w/Medical
<i>Generic (Preferred)</i>	\$10	\$10	\$7 after Ded
<i>Generic (Non-Preferred)</i>	\$10	\$10	\$7 after Ded
<i>Brand (Preferred)</i>	Ded than 25%	Ded than 25%	\$21 after Ded
<i>Brand (Non-Preferred)</i>	Ded than 50%	Ded than 50%	\$42 after Ded
<i>Specialty (Preferred)</i>	Ded than 20%	Ded than 20%	\$100 after Ded
<i>Specialty (Non-Preferred)</i>	Ded than 20%	Ded than 20%	\$100 after Ded
<i>Pediatric Dental</i>	Included	Included	Included
<i>Pediatric Vision</i>	Included	Included	Included
<i>Notes</i>	TeleHealth	TeleHealth	TeleHealth
<u>MEDICAL</u> – “Select Health Option 1 (SelectHealth Plan)” as presented:			
<i>Deductible</i>	\$2,500 in network/\$2,750 out of network		
<i>Physician Co-pay</i>	\$15.00 (after deductible is met)		
<i>Specialist Co-pay</i>	\$25.00 (after deductible is met)		
<i>Prescription</i>	Four tiered system after in network deductible met		
<u>MEDICAL</u> – “Select Health Option 2 (PPO Plan)” as presented:			
<i>Deductible</i>	\$1,250 in network/\$2,500 out of network		
<i>Physician Co-pay</i>	\$30.00		
<i>Specialist Co-pay</i>	\$45.00		
<i>Prescription</i>	Three tiered system after RX deductible met		

<u>DENTAL</u> – Incentive Plan offered by Delta Dental
<u>WILLAMETTE Dental Blue Connect</u> – employee pays contribution amount that exceeds Delta Dental premium per month
<u>VISION</u> – offered through LifeMap, which is affiliated with VSP
<b>This is a brief outline of benefits and does not include coverage details, limitations, or exclusions.</b> Plan coverage information will be available on the District’s Website

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For the Board

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For the Association

Date: \_\_\_\_\_