

Management & Confidential Benefit Plans and Monthly Premiums 2024-2025

MEDICAL	Moda Plan 1	Moda Plan 2	Moda Plan 3	Moda Plan 6*	Kaiser 1	Kaiser 3 *
Employee Only						
Full Premium	\$793.33	\$735.94	\$690.43	\$614.29	\$721.66	\$439.75
Employer Paid	\$721.66	\$721.66	\$690.43	\$721.66	\$721.66	\$721.66
Employee Paid	\$71.67	\$14.28	\$0.00	(\$107.37)	\$0.00	(\$276.67)
Employee & Spouse/Domestic						
Full Premium	\$1,745.32	\$1,619.06	\$1,518.96	\$1,351.45	\$1,587.65	\$968.02
Employer Paid	\$1,587.65	\$1,587.65	\$1,518.96	\$1,587.65	\$1,587.65	\$1,587.65
Employee Paid	\$157.67	\$31.41	\$0.00	(\$236.20)	\$0.00	(\$553.33)
Employee & Child						
Full Premium	\$1,507.36	\$1,398.31	\$1,311.87	\$1,167.19	\$1,371.16	\$835.18
Employer Paid	\$1,371.16	\$1,371.16	\$1,311.87	\$1,371.16	\$1,371.16	\$1,371.16
Employee Paid	\$136.20	\$27.15	\$0.00	(\$203.97)	\$0.00	(\$535.98)
Family						
Full Premium	\$2,459.39	\$2,281.45	\$2,140.41	\$1,904.35	\$2,237.15	\$1,363.49
Employer Paid	\$2,237.15	\$2,237.00	\$2,140.41	\$2,237.15	\$2,237.15	\$2,237.15
Employee Paid	\$222.24	\$44.45	\$0.00	(\$332.80)	\$0.00	(\$553.33)

The "(Negative \$\$)" values above will be the per month HSA contribution. The College's contribution will not exceed 80% of the IRS maximum and total calendar year contribution cannot exceed the IRS maximum and excludes any catch-up values. Your end of year contributions may be adjusted to keep your total contribution from exceeding the maximum.

2024 HSA Maximum Single: \$4,150 Family: \$8,300
 2025 HSA Maximum Single: \$4,300 Family: \$8,550

DENTAL	Delta Plan #5	Willamette Plan #8	Kaiser Plan #8
Employee Only			
Full Premium	\$59.66	\$46.99	\$73.48
Employer Paid	\$59.66	\$46.99	\$59.66
Employee Paid	\$0.00	\$0.00	\$13.82
Employee & Spouse/Domestic			
Full Premium	\$118.17	\$93.99	\$161.68
Employer Paid	\$118.17	\$93.99	\$118.17
Employee Paid	\$0.00	\$0.00	\$43.51
Employee & Child			
Full Premium	\$131.41	\$100.11	\$139.63
Employer Paid	\$131.41	\$100.11	\$131.41
Employee Paid	\$0.00	\$0.00	\$8.22
Family			
Full Premium	\$194.60	\$150.18	\$227.81
Employer Paid	\$194.60	\$150.18	\$194.60
Employee Paid	\$0.00	\$0.00	\$33.21

VISION	Moda Quartz	Moda Opal	Kaiser Plan #5
Employee Only			
Full Premium	\$12.58	\$21.83	\$8.49
Employer Paid	\$12.58	\$12.58	\$8.49
Employee Paid	\$0.00	\$9.25	\$0.00
Employee & Spouse/Domestic			
Full Premium	\$27.71	\$47.99	\$18.67
Employer Paid	\$27.71	\$27.71	\$18.67
Employee Paid	\$0.00	\$20.28	\$0.00
Employee & Child			
Full Premium	\$23.91	\$41.40	\$16.12
Employer Paid	\$23.91	\$23.91	\$16.12
Employee Paid	\$0.00	\$17.49	\$0.00
Family			
Full Premium	\$38.99	\$67.60	\$26.31
Employer Paid	\$38.99	\$38.99	\$26.31
Employee Paid	\$0.00	\$28.61	\$0.00