

2018-19 OEGB (Oregon Educators Benefit Board)
CLASSIFIED OPEN ENROLLMENT INFORMATION

This booklet includes the following information:

2018-19 Changes

Online Instructions and Opt-out Form

Important
 The OEGB Board has made enrollment mandatory this year to maintain coverage



OEGB open enrollment labs are scheduled for:
Tuesday, August 28th from 2:00 pm to 4:00 pm and
Thursday, August 30th from 2:00 pm to 4:00 pm
at the high school computer lab.

Medical Plan Options	Synergy	Statewide	Dental Plan Options	Vision Plan		
	Network	(Non-Synergy)		Premium	Options	Premium
Alder	\$1,550.21	not offered	Plan 1 w/Ortho	\$160.73	Opal \$600 max	\$52.64
Birch	\$1,371.83	\$1,524.27	Plan 5 w/Ortho	\$141.85	Pearl \$400 max	\$43.02
Cedar	\$1,271.27	\$1,412.51	Plan 6 (Excl. Ortho)	\$100.31	Quartz \$250 max	\$30.37
Dogwood	\$1,179.73	\$1,310.84	Will. Dental 8 w/Ortho	\$115.89	VSP Choice Plus	\$45.13
Evergreen**	\$1,058.15	\$1,175.76			VSP Choice	\$21.94
Fir*	\$1,036.99	\$1,152.24				

**Pharmacy is included in the Evergreen and Fir Plan as any other covered medical expense. Rx's are applied the deductible is met, they are paid at the same level as other covered medical expenses. Generally, you are ineligible for the Fir or Evergreen Plan if you are also covered under a non-High Deductible Health Plan. If you are considering the Evergreen or Fir Plan, please read all details available on the OEGB, Moda and IRS websites.

To log on to MyOebb, go to www.OEGBenroll.com

For more information on plans & open enrollment, please go to the following link: www.OEGBplandocs.com

Enrollment information about the PacificSource Flexible Spending Account, which allows employees to set aside funds in a tax advantaged account for health care and dependent care expenses, is included in a separate handout. Please note that the Flexible Spending Account for health care expenses is not available to those enrolling in Evergreen or Fir.

---OEGB PLAN COST WORKSHEET---

Cost of Medical Plan, if taken+	_____
Cost of Dental Plan, if taken +	_____
Cost of Vision Plan, if taken +	_____
Basic Life Insurance Cost +	2.08
Sub-Total:	_____
Minus District Contribution: -	_____
Total Monthly Cost: =	_____

The monthly maximum district contribution for classified staff members working full-time is \$1,050.

Monthly Maximum District Contribution for Classified Staff Members hired on or after July 1, 2013:

7.5-8.0 hours per day (100%)	\$1,050.00/month	
6.5-7.4 hours per day (75%)	\$787.500/month	(Note: bus drivers must work 3.0 hours per day to receive this amount)
5.0-6.4 hours per day (50%)	\$525.00/month	

Monthly Maximum District Contribution for Classified Staff Members hired between July 1, 2001 & June 30, 2013:

6.5+ hours per day (100%)	\$1,050.00/month	
5.0-6.4 hours per day (75%)	\$787.500/month	(Note: bus drivers must work 3.0 hours per day to receive this amount)
4.0-4.9 hours per day (50%)	\$525.00/month	

Option for Classified Staff Members in 2018-19:

For employees working at least 6.5 hours a day who choose Evergreen or Fir, the District shall make a monthly contribution of \$50 into the employee's HSA provided the employee is eligible for a district insurance contribution and has been employed as an employee or temporary employee for at least one year.