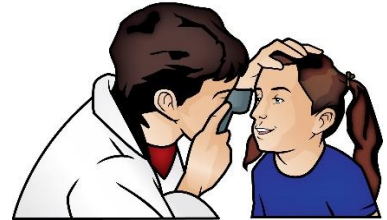


2021-2022 OEGB (Oregon Educators Benefit Board)
Classified OPEN ENROLLMENT INFORMATION



All eligible employees **MUST** participate in 2021-2022 Open Enrollment. Please see the district website under Resources> Staff> Insurance Forms & information for plan information.

Employees that qualify for the full district insurance contribution amount who opt out of medical, dental, and vision coverage may qualify for a \$200 per month cash incentive. Employee must be covered by another employer sponsored health coverage and provide a copy of coverage to district.

Open Enrollment is required for 2021-2022 . You must log into your OEGB portal and confirm your selections for the 2021-22 benefit year between August 15th and September 15th or you will risk losing medical, dental, and/or vision coverage. Labs will be offered on September 1st and September 8th from 2 pm to 4 pm at the High School Computer lab for employees who need assistance completing their Open Enrollment.

Medical Plan Options	Premium (price per month)	Dental Plan Options	Premium (price per month)	Vision Plan Options	Premium (price per month)
Plan 1	\$1,687.32	Plan 1 w/Ortho	\$159.96	Opal \$600 max	\$54.72
Plan 2	\$1,569.75	Plan 5 w/Ortho	\$141.17	Pearl \$400 max	\$44.73
Plan 3	\$1,475.69	Plan 6 (Excl. Ortho)	\$99.83	Quartz \$250 max	\$31.58
Plan 4	\$1,400.41	Will. Dental 8 w/Ortho	\$119.53	VSP Choice Plus	\$39.71
Plan 5	\$1,294.88			VSP Choice	\$19.31
Plan 6	\$1,326.09 (HSA compatible plan)				
Plan 7	\$1,237.63 (HSA compatible plan)				

**Pharmacy is included in Plan 6 and Plan 7 as any other covered medical expense. Rx's are applied once the deductible is met. They are paid at the same level as other covered medical expenses. If you are considering plan 6 or 7, 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 Plan 6 or 7.**

---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 \$1,169.00.

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

7.5-8.0 hours per day (100%)	\$1,169.00/month	
6.5-7.4 hours per day (75%)	\$876.75/month	(Note: bus drivers must work 3.0 hours per day to receive this amount)
5.0-6.4 hours per day (50%)	\$584.50/month	

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

6.5+ hours per day (100%)	\$1,169.00/month	
5.0-6.4 hours per day (75%)	\$876.75/month	(Note: bus drivers must work 3.0 hours per day to receive this amount)
4.0-4.9 hours per day (50%)	\$584.50/month	

Option for Classified Staff Members in 2020-21:

For employees working at least 6.5 hours a day who choose Plan 6 or Plan 7, 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. Please contact Jennifer Maynard if interested.