Portland Community College Health Insurance Cost Sheet
October 1, 2022, to September 30, 2023

PCC Contribution

The College makes a monthly contribution (the "Cap") toward medical, vision and dental premiums. The Cap is determined by the tier of coverage you are enrolled in for your **medical** plan. If you enroll in self-only medical, you will get the self-only Cap regardless of vision and dental tiers of coverage.

The following Caps are for full-time employees (prorated by FTE for part-time employees).

- $773 for self only
- $1,416 for self plus spouse or domestic partner (DP)
- $1,315 for self plus child or children
- $1,667 for self plus spouse or DP and child or children
- $773 if enrolling in vision and/or dental only (no medical) regardless of tier of coverage.

Monthly Premiums

Medical Plans	Self Only	Self + Spouse/DP	Self + Child(ren)	Self + Spouse/DP + Child(ren)
Kaiser Plan 1	$663.25	$1,459.17	$1,260.18	$2,056.10
Kaiser Plan 2B	$532.16	$1,171.49	$1,011.04	$1,650.48
Kaiser Plan 3 (HSA eligible)	$404.50	$890.43	$768.23	$1,254.20
Moda Plan 2	$686.74	$1,510.83	$1,304.84	$2,128.93
Moda Plan 3	$644.28	$1,417.42	$1,224.17	$1,997.32
Moda Plan 6 (HSA eligible)	$573.23	$1,261.10	$1,089.16	$1,777.05
Vision Plans				
Kaiser	$8.28	$18.20	$15.72	$25.66
Moda Quartz	$13.05	$28.74	$24.80	$40.45
VSP Choice Plus	$16.54	$36.41	$31.44	$51.30
Dental Plans				
Kaiser with orthodontia	$73.07	$160.77	$138.84	$226.53
Moda Plan 5 with orthodontia	$57.23	$113.37	$126.08	$186.71
Moda Plan 6 **without** orthodontia	$43.70	$86.50	$87.81	$134.14
Willamette with orthodontia	$46.60	$93.20	$99.27	$148.91

Your Premium Costs

Any cost over the amount paid by the College is your responsibility to pay and will be deducted from your paychecks on a pre-tax basis.

Medical Premium		_____
Vision Premium	+	_____
Dental Premium	+	_____
Total Monthly Premium	=	_____
Cap	-	_____
Monthly Pre-tax Payroll Deduction	=	_____

Cap may be used toward the OEBB/PEBB $5 surcharge for double medical coverage, if applicable.