

West Bonner County School District
Health - Vision - Dental - Life Insurance Benefit
 2016-17 School Year

Blue Cross Health & VSP Vision

Rate Classification for Blue Value	Health Premium	VSP Premium	Total Premium	Employee Benefit	Employee Out of Pocket
Employee	\$ 493.40	\$ 7.00	\$ 500.40	\$ 500.40	\$ -
Employee + Spouse	\$ 1,073.80	\$ 10.00	\$ 1,083.80	\$ 500.40	\$ 583.40
Employee + 1 Child	\$ 756.80	\$ 10.00	\$ 766.80	\$ 500.40	\$ 266.40
Employee + Children	\$ 878.70	\$ 17.85	\$ 896.55	\$ 500.40	\$ 396.15
Family	\$ 1,244.50	\$ 17.85	\$ 1,262.35	\$ 500.40	\$ 761.95

Rate Classification for PPO Plan	Health Premium	VSP Premium	Total Premium	Employee Benefit	Employee Out of Pocket
Employee	\$ 512.25	\$ 7.00	\$ 519.25	\$ 500.40	\$ 18.85
Employee + Spouse	\$ 1,115.05	\$ 10.00	\$ 1,125.05	\$ 500.40	\$ 624.65
Employee + 1 Child	\$ 785.80	\$ 10.00	\$ 795.80	\$ 500.40	\$ 295.40
Employee + Children	\$ 912.40	\$ 17.85	\$ 930.25	\$ 500.40	\$ 429.85
Family	\$ 1,292.30	\$ 17.85	\$ 1,310.15	\$ 500.40	\$ 809.75

Delta Dental

Rate Classification	Health Premium	Employee Benefit	Employee Out of Pocket
Employee	\$ 33.28	\$ 33.28	\$ -
Employee + Spouse	\$ 66.57	\$ 33.28	\$ 33.29
Employee + 1 Child	\$ 66.16	\$ 33.28	\$ 32.88
Employee + Children	\$ 96.91	\$ 33.28	\$ 63.63
Family	\$ 128.23	\$ 33.28	\$ 94.95

Benefit Paid	
Total Paid	\$ 539.68
Employee Out of Pocket	\$ 6,476.16

EAP

Health Premium	Employee Benefit	Employee Out of Pocket
\$ 1.74	\$ 1.74	\$ -

Willamette Dental

Rate Classification	Health Premium	Employee Benefit	Employee Out of Pocket
Employee	\$34.48	\$33.28	\$1.20
Employee + Spouse	\$68.98	\$33.28	\$35.70
Employee + 1 Child	\$68.52	\$33.28	\$35.24
Employee + Children	\$100.38	\$33.28	\$67.10
Family	\$131.78	\$33.28	\$98.50

LifeMap

Rate Classification	Health Premium	Employee Benefit	Employee Out of Pocket
Employee	\$ 4.26	\$ 4.26	\$ -