

ESTACADA SCHOOL DISTRICT #108  
2011-2012  
ADMINISTRATIVE/CONFIDENTIAL/SUPERVISORY/NON REPRESENTED  
EMPLOYEES  
BENEFIT OPTIONS

THIS IS NOT AN APPLICATION

For Plans and Rates Visit  
[://www.oregon.gov/DAS/OEBB/index.shtml](http://www.oregon.gov/DAS/OEBB/index.shtml)

To Register During Open Enrollment Visit  
[://myoebb.org/oebb/lpb.main](http://myoebb.org/oebb/lpb.main)

All applications must be submitted by the employee on the OEBB web site  
between **8/15/2011 and 09/06/2011.**  
Forms submitted after 09/06/2011 will not be processed for Septembers payroll-  
Octobers payroll could have double deductions!  
Listed below are month rates

SELECT THE MEDICAL COVERAGE YOU WANT:

1. KAISER HEALTH PLAN 1W/ KAISER PHARMACY  
COMPOSITE \$1140.97
  
2. ODS HEALTH PLAN 5 WITH PHARMACY PLAN B  
COMPOSITE \$1287.52
  
3. ODS HEALTH PLAN 6 WITH PHARMACY PLAN  
COMPOSITE \$1165.38
  
4. PROVIDENCE 2 WITH PHARMACY PLAN  
COMPOSITE \$1547.51

**SELECT THE DENTAL AND VISION COVERAGE ONLY IF YOU SELECT A MEDICAL PLAN OR PROVIDE PROOF OF OTHER HEALTH INSURANCE COVERAGE.**  
**KAISER VISION AND DENTAL ONLY AVAILABLE WITH KAISER MEDICAL**

- |                                      |          |
|--------------------------------------|----------|
| 1. KAISER DENTAL PLAN 8/WITH ORTHO 2 |          |
| COMPOSITE                            | \$166.43 |
| 2. ODS DENTAL PLAN 1/WITH ORTHO      |          |
| COMPOSITE                            | \$147.70 |
| 3. WILLAMETTE DENTAL PLAN 8 W/ORTHO  |          |
| COMPOSITE                            | \$103.02 |
| 4. KAISER <i>VISION</i> PLAN 5       |          |
| COMPOSITE                            | \$18.05  |
| 5. ODS <i>VISION</i> PLAN 4          |          |
| COMPOSITE                            | \$38.97  |

**OTHER INSURANCE, WHICH IS PROVIDED:**

|                                       |  |
|---------------------------------------|--|
| Life & Disability (\$50,000 coverage) | \$2.28                                 |
| LTD                                   | \$.002 times average<br>monthly salary |

TOTAL COST OF YOUR LIFE, DENTAL AND MEDICAL   \$ \_\_\_\_\_  
The district contributes \$1250 per month for 8 hour employee or pro-rated at \$156.25 per hour worked.