CLASSIFIED RETIRED 4J EMPLOYEES (56.25% District Contribution) 2016-2017 PLAN YEAR - MONTHLY CONTRIBUTIONS

EFFECTIVE 10/01/2016 through 09/30/2017

Rate changes will be reflected on October 31st pay date and November 5th bank withdrawals.

Connexus (PPO) is formerly called Statewide							
Connexus (PPO) Medical, Vision, Rx			Birch		Cedar		Dogwood
	and MODA DENTAL		\$800 Deductible		\$1200 Deductible		\$1600 Deductible
cc	EE	\$	479.11	\$	418.59	\$	347.42
CONNEXUS	EE+SP	\$	1,287.37	\$	1,154.24	\$	997.71
EX	EE+CH	\$	1,111.86	\$	996.88	\$	861.71
US	FAMILY	\$	1,924.21	\$	1,736.63	\$	1,516.06
Connexus (PPO) Medical, Vision, Rx			Direh		Cadar		Degwood
	and WILLAMETTE DENTAL		Birch \$800 Deductible		Cedar \$1200 Deductible		Dogwood \$1600 Deductible
		\$	468.90	\$	408.38	\$	337.21
CONNEXUS	EE+SP	э \$	1,267.13	ֆ \$	1,134.00	ֆ \$	977.47
NE	EE+CH	φ \$	1,083.18	э \$	968.20	\$ \$	833.03
XU	FAMILY	\$	1,884.74	\$	1,697.16	\$	1,476.59
,		Ψ	1,00 1.7 1	Ψ	1,007.10	Ψ	1, 17 0.00
Connexus (PPO) Medical, Vision, Rx			Birch		Cedar		Dogwood
	and WAIVED DENTAL*		\$800 Deductible		\$1200 Deductible		\$1600 Deductible
cc	EE	\$	426.97	\$	366.45	\$	295.28
CONNEXUS	EE+SP	\$	1,184.10	\$	1,050.97	\$	894.44
EX	EE+CH	\$	994.83	\$	879.85	\$	744.68
us	FAMILY	\$	1,751.97	\$	1,564.39	\$	1,343.82
			SYNERGY			1	
Syne	ergy (CCM) Medical, Vision, Rx		Birch		Cedar		Dogwood
	and MODA DENTAL		\$800 Deductible		\$1200 Deductible		\$1600 Deductible
S١	EE	\$	417.79	\$	363.33	\$	299.30
Ń	EE+SP	\$	1,152.51	\$	1,032.70	\$	891.83
SYNERGY	EE+CH	\$	995.37	\$	891.91	\$	770.25
¥	FAMILY	\$	1,734.17	\$	1,565.36	\$	1,366.85
Synergy (CCM) Medical, Vision, Rx		Birch		Cedar		Dogwood	
	and WILLAMETTE DENTAL		\$800 Deductible		\$1200 Deductible		\$1600 Deductible

	and WILLAMETTE DENTAL		\$800 Deductible		\$1200 Deductible		\$1600 Deductible
	e EE	\$	407.58	\$	353.12	\$	289.09
	EE+SP	\$	1,132.27	\$	1,012.46	\$	871.59
	EE+CH	\$	966.69	\$	863.23	\$	741.57
	FAMILY	\$	1,694.70	\$	1,525.89	\$	1,327.38
Synergy (CCM) Medical, Vision, Rx			Birch		Cedar		Doawood

	Syne	Synergy (CCM) Medical, Vision, Rx		Birch		Cedar		Dogwood	
	and WAIVED DENTAL*		\$800 Deductible		\$1200 Deductible		\$1600 Deductible		
I	S	EE	\$	365.65	\$	311.19	\$	247.16	
	YNE	EE+SP	\$	1,049.24	\$	929.43	\$	788.56	
	ERG	EE+CH	\$	878.34	\$	774.88	\$	653.22	
I	Υŧ	FAMILY	\$	1,561.93	\$	1,393.12	\$	1,194.61	

* If you waive dental coverage, you cannot re-enroll in the future.

The amounts shown above reflect the premium for which you will be responsible, after any applicable District Contribution has been applied. The withdrawal on the 5th of the month will pay for the prior month's premium.