

LICENSED ACTIVE 4J EMPLOYEES CONNEXUS (PPO) formerly STATEWIDE

2016-2017 PLAN YEAR - MONTHLY EMPLOYEE CONTRIBUTIONS

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

To determine your monthly payroll deduction, find your enrollment status (FTE) on the left and follow the row to the plan you choose. These are composite rates, meaning the rate is the same regardless of how many dependents you cover on the plan. You can cover just yourself or your entire family for the same price.

All rates include medical, vision, pharmacy, and dental where noted.

Connexus (PPO) Medical, Vision, Rx and MODA DENTAL	Birch \$800 Deductible	Cedar \$1200 Deductible	Dogwood \$1600 Deductible
.50 - .75	\$771.64	\$627.62	\$458.29
.76 - .80	\$711.64	\$567.62	\$398.29
.81 - .85	\$651.64	\$507.62	\$338.29
.86 - .90	\$591.64	\$447.62	\$278.29
.91 - .95	\$531.64	\$387.62	\$218.29
.96 - 1.0	\$471.64	\$327.62	\$158.29

Connexus (PPO) Medical, Vision, Rx and WILLAMETTE DENTAL	Birch \$800 Deductible	Cedar \$1200 Deductible	Dogwood \$1600 Deductible
.50 - .75	\$749.99	\$605.97	\$436.64
.76 - .80	\$689.99	\$545.97	\$376.64
.81 - .85	\$629.99	\$485.97	\$316.64
.86 - .90	\$569.99	\$425.97	\$256.64
.91 - .95	\$509.99	\$365.97	\$196.64
.96 - 1.0	\$449.99	\$305.97	\$136.64

Connexus (PPO) Medical, Vision, Rx and WAIVED DENTAL*	Birch \$800 Deductible	Cedar \$1200 Deductible	Dogwood \$1600 Deductible
.50 - .75	\$643.32	\$499.30	\$329.97
.76 - .80	\$583.32	\$439.30	\$269.97
.81 - .85	\$523.32	\$379.30	\$209.97
.86 - .90	\$463.32	\$319.30	\$149.97
.91 - .95	\$403.32	\$259.30	\$89.97
.96 - 1.0	\$343.32	\$199.30	\$29.97

You have the option to waive dental coverage and thereby reduce your out-of-pocket insurance cost. **You may only waive dental coverage during annual enrollment or upon initial eligibility, and you will not be able to re-enroll in dental coverage for the remainder of the plan year** unless you lose eligibility for other group dental coverage and provide proof of the loss within 31 days.

* Members and/or their qualified dependents who do not enroll in a dental plan when initially eligible and elect to enroll during a future open enrollment will be subject to "waiting period" restrictions - meaning, for the first 12 months, the dental coverage will only allow preventative services and no orthodontia. The 12-month waiting period does not apply for members who enroll in OEBB dental coverage due to loss of other OEBB coverage.