

**Hood River County School District
Licensed Employees
Health Insurance for Plan Year October 1, 2023 to September 30, 2024**

2023-24 Monthly Maximum District Contribution with Group HRA plan	\$	1,536.13
2023-24 Monthly District Contribution for part-time proration only	\$	1,487.73
Plus opt-out credit	\$	196.74
Total Monthly Maximum District Contribution for part-time proration*	\$	1,684.47

*Per the collective bargaining agreement, effective October 1, 2017, the maximum District contribution shall be used solely for the computation of the pro-rated contribution provided to part-time employees as set forth in 17.A.5.

Moda Health Plans & Premium Rates		Moda Plan 5 With Group HRA	
Deductible per person/family		\$300/\$600/\$900	
Maximum OOP per person/family		\$2,925/\$5,850/\$8,775	
Group HRA Plan contribution		\$	85.00
Moda Medical Plan 5		\$	1,386.16
Moda Delta Dental Premier Plan 5		\$	140.95
Moda Pearl Vision Plan		\$	41.02
Total Monthly Premium		\$	1,653.13
District and Employee Premiums by FTE			
1.00	District Contribution	\$	1,536.13
	Employee Deduction	\$	117.00
	Total Monthly Premium	\$	1,653.13
0.83	District Contribution	\$	1,449.11
	Employee Deduction	\$	204.02
	Total Monthly Premium	\$	1,653.13
0.80	District Contribution	\$	1,408.69
	Employee Deduction	\$	244.44
	Total Monthly Premium	\$	1,653.13
0.75	District Contribution	\$	1,341.31
	Employee Deduction	\$	311.82
	Total Monthly Premium	\$	1,653.13
0.67	District Contribution	\$	1,233.50
	Employee Deduction	\$	419.63
	Total Monthly Premium	\$	1,653.13
0.60	District Contribution	\$	1,139.17
	Employee Deduction	\$	513.96
	Total Monthly Premium	\$	1,653.13
0.50	District Contribution	\$	1,004.42
	Employee Deduction	\$	648.71
	Total Monthly Premium	\$	1,653.13