

2016-17 OEGB (Oregon Educators Benefit Board)  
**LICENSED/ADMIN OPEN ENROLLMENT INFORMATION**  
*(More information will be handed out at in-service)*



**Important**  
 The OEGB Board has made enrollment mandatory this year to maintain coverage

OEGB open enrollment labs are scheduled for Wednesday, August 31<sup>st</sup> from 2:00pm to 4:00pm and Thursday, September 1st from 2:00pm to 4:00pm at the high school computer lab.

Medical Plan Options	Synergy	Statewide	Vision Plan			
	Network	(Non-Synergy)	Dental Plan Options	Premium	Options	Premium
Alder	\$1,483.81	\$1,646.67	Plan 1 w/Ortho	\$154.35	Opal \$600 max	\$50.04
Birch	\$1,313.08	\$1,458.98	Plan 2 w/Ortho	\$138.57	Pearl \$400 max	\$40.89
Cedar	\$1,183.47	\$1,314.96	Plan 3 w/Ortho	\$135.77	Quartz \$250 max	\$28.87
Dogwood	\$1,031.07	\$1,145.63	Plan 4 w/Ortho	\$128.32		
Evergreen**	\$911.73	\$1,013.04	Plan 6 (Excl. Ortho)	\$96.31		
			Will. Dental 8 w/Ortho	\$106.67		

\*\*Pharmacy is included in Evergreen Plan as any other covered medical expense. Rx's are applied the deductible is met, they are paid at the same level as other covered medical expenses. Generally, you are ineligible for Evergreen Plan if you are also covered under a non-High Deductible Health Plan. If you are considering Evergreen Plan, please read all details available on the OEGB, Moda and IRS websites. In addition, you must contribute to a Health Savings Account if you choose the Evergreen plan.

To log on to MyOebb, go to <https://myoebb.org/oebb/%21pb.main>

For more information on plans & open enrollment, please go to the following link:  
<http://www.oregon.gov/oha/OEGB/Pages/2016-Open-Enrollment.aspx>

---OEGB PLAN COST WORKSHEET---

Cost of Medical Plan, if taken	+	_____
Cost of Dental Plan, if taken	+	_____
Cost of Vision Plan, if taken	+	_____
Basic Life Insurance Cost	+	2.44
Sub-Total:	=	_____
Minus District Contribution:	-	_____
Total Monthly Cost:	=	_____

**Monthly Maximum District Contribution for Licensed Staff Members**

The monthly maximum district contribution for licensed staff members working full-time is \$1060 per month. The district contribution is pro-rated for licensed staff members working less than full-time. For example, a 0.60 full time equivalent licensed staff member's monthly maximum district contribution is **\$636** per month (\$1060 x .60 = \$636).

**Options for Licensed Staff Members in 2016-17:**

1. The District will contribute \$50 per month to a health savings account for FULL-TIME licensed staff members who enroll in the Evergreen plan.
2. Full-time licensed staff employees who opt out of medical, dental & vision will receive a \$200 cash incentive if they meet eligibility requirements including being covered by another employer sponsored group medical insurance program. Please refer to the Full-Time Licensed Opt Out Form for additional information.