

**Faculty Monthly Insurance Rates  
October 1, 2022 - September 30, 2023**

<b>Moda Medical Plan 1, Dental Premier Plan 1, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$740.30	\$64.79	\$22.64	\$11.32	\$839.05	\$827.73	\$11.32
<b>EE + Sp/Partner</b>	\$1,628.65	\$128.37	\$49.78	\$11.32	\$1,818.12	\$1,716.46	\$101.66
<b>EE + Child(ren)</b>	\$1,406.60	\$142.74	\$42.95	\$11.32	\$1,603.61	\$1,512.68	\$90.93
<b>Full Family</b>	\$2,294.98	\$211.39	\$70.12	\$11.32	\$2,587.81	\$2,459.20	\$128.61

<b>Moda Medical Plan 1, Dental Premier Plan 5, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$740.30	\$57.23	\$22.64	\$11.32	\$831.49	\$820.17	\$11.32
<b>EE + Sp/Partner</b>	\$1,628.65	\$113.37	\$49.78	\$11.32	\$1,803.12	\$1,716.46	\$86.66
<b>EE + Child(ren)</b>	\$1,406.60	\$126.08	\$42.95	\$11.32	\$1,586.95	\$1,512.68	\$74.27
<b>Full Family</b>	\$2,294.98	\$186.71	\$70.12	\$11.32	\$2,563.13	\$2,459.20	\$103.93

<b>Moda Medical Plan 1, Dental Premier Plan 6, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$740.30	\$43.70	\$22.64	\$11.32	\$817.96	\$806.64	\$11.32
<b>EE + Sp/Partner</b>	\$1,628.65	\$86.50	\$49.78	\$11.32	\$1,776.25	\$1,716.46	\$59.79
<b>EE + Child(ren)</b>	\$1,406.60	\$87.81	\$42.95	\$11.32	\$1,548.68	\$1,512.68	\$36.00
<b>Full Family</b>	\$2,294.98	\$134.14	\$70.12	\$11.32	\$2,510.56	\$2,459.20	\$51.36

<b>Moda Medical Plan 1, Willamette Dental, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$740.30	\$46.60	\$22.64	\$11.32	\$820.86	\$809.54	\$11.32
<b>EE + Sp/Partner</b>	\$1,628.65	\$93.20	\$49.78	\$11.32	\$1,782.95	\$1,716.46	\$66.49
<b>EE + Child(ren)</b>	\$1,406.60	\$99.27	\$42.95	\$11.32	\$1,560.14	\$1,512.68	\$47.46
<b>Full Family</b>	\$2,294.98	\$148.91	\$70.12	\$11.32	\$2,525.33	\$2,459.20	\$66.13

to determine the per paycheck deduction, divide the value in the "Employee Contribution" column by 2  
pay period effective dates: 09/01/2022 - 08/31/2023

**Faculty Monthly Insurance Rates  
October 1, 2022 - September 30, 2023**

<b>Moda Medical Plan 2, Dental Premier Plan 1, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$686.74	\$64.79	\$22.64	\$11.32	\$785.49	\$774.17	\$11.32
<b>EE + Sp/Partner</b>	\$1,510.83	\$128.37	\$49.78	\$11.32	\$1,700.30	\$1,688.98	\$11.32
<b>EE + Child(ren)</b>	\$1,304.84	\$142.74	\$42.95	\$11.32	\$1,501.85	\$1,490.53	\$11.32
<b>Full Family</b>	\$2,128.93	\$211.39	\$70.12	\$11.32	\$2,421.76	\$2,410.44	\$11.32

<b>Moda Medical Plan 2, Dental Premier Plan 5, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$686.74	\$57.23	\$22.64	\$11.32	\$777.93	\$766.61	\$11.32
<b>EE + Sp/Partner</b>	\$1,510.83	\$113.37	\$49.78	\$11.32	\$1,685.30	\$1,673.98	\$11.32
<b>EE + Child(ren)</b>	\$1,304.84	\$126.08	\$42.95	\$11.32	\$1,485.19	\$1,473.87	\$11.32
<b>Full Family</b>	\$2,128.93	\$186.71	\$70.12	\$11.32	\$2,397.08	\$2,385.76	\$11.32

<b>Moda Medical Plan 2, Dental Premier Plan 6, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$686.74	\$43.70	\$22.64	\$11.32	\$764.40	\$753.08	\$11.32
<b>EE + Sp/Partner</b>	\$1,510.83	\$86.50	\$49.78	\$11.32	\$1,658.43	\$1,647.11	\$11.32
<b>EE + Child(ren)</b>	\$1,304.84	\$87.81	\$42.95	\$11.32	\$1,446.92	\$1,435.60	\$11.32
<b>Full Family</b>	\$2,128.93	\$134.14	\$70.12	\$11.32	\$2,344.51	\$2,333.19	\$11.32

<b>Moda Medical Plan 2, Willamette Dental, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$686.74	\$46.60	\$22.64	\$11.32	\$767.30	\$755.98	\$11.32
<b>EE + Sp/Partner</b>	\$1,510.83	\$93.20	\$49.78	\$11.32	\$1,665.13	\$1,653.81	\$11.32
<b>EE + Child(ren)</b>	\$1,304.84	\$99.27	\$42.95	\$11.32	\$1,458.38	\$1,447.06	\$11.32
<b>Full Family</b>	\$2,128.93	\$148.91	\$70.12	\$11.32	\$2,359.28	\$2,347.96	\$11.32

to determine the per paycheck deduction, divide the value in the "Employee Contribution" column by 2  
pay period effective dates: 09/01/2022 - 08/31/2023

**Faculty Monthly Insurance Rates**  
**October 1, 2022 - September 30, 2023**

<b>Moda Medical Plan 3, Dental Premier Plan 1, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$644.28	\$64.79	\$22.64	\$11.32	\$743.03	\$731.71	\$11.32
<b>EE + Sp/Partner</b>	\$1,417.42	\$128.37	\$49.78	\$11.32	\$1,606.89	\$1,595.57	\$11.32
<b>EE + Child(ren)</b>	\$1,224.17	\$142.74	\$42.95	\$11.32	\$1,421.18	\$1,409.86	\$11.32
<b>Full Family</b>	\$1,997.32	\$211.39	\$70.12	\$11.32	\$2,290.15	\$2,278.83	\$11.32

<b>Moda Medical Plan 3, Dental Premier Plan 5, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$644.28	\$57.23	\$22.64	\$11.32	\$735.47	\$724.15	\$11.32
<b>EE + Sp/Partner</b>	\$1,417.42	\$113.37	\$49.78	\$11.32	\$1,591.89	\$1,580.57	\$11.32
<b>EE + Child(ren)</b>	\$1,224.17	\$126.08	\$42.95	\$11.32	\$1,404.52	\$1,393.20	\$11.32
<b>Full Family</b>	\$1,997.32	\$186.71	\$70.12	\$11.32	\$2,265.47	\$2,254.15	\$11.32

<b>Moda Medical Plan 3, Dental Premier Plan 6, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$644.28	\$43.70	\$22.64	\$11.32	\$721.94	\$710.62	\$11.32
<b>EE + Sp/Partner</b>	\$1,417.42	\$86.50	\$49.78	\$11.32	\$1,565.02	\$1,553.70	\$11.32
<b>EE + Child(ren)</b>	\$1,224.17	\$87.81	\$42.95	\$11.32	\$1,366.25	\$1,354.93	\$11.32
<b>Full Family</b>	\$1,997.32	\$134.14	\$70.12	\$11.32	\$2,212.90	\$2,201.58	\$11.32

<b>Moda Medical Plan 3, Willamette Dental, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$644.28	\$46.60	\$22.64	\$11.32	\$724.84	\$713.52	\$11.32
<b>EE + Sp/Partner</b>	\$1,417.42	\$93.20	\$49.78	\$11.32	\$1,571.72	\$1,560.40	\$11.32
<b>EE + Child(ren)</b>	\$1,224.17	\$99.27	\$42.95	\$11.32	\$1,377.71	\$1,366.39	\$11.32
<b>Full Family</b>	\$1,997.32	\$148.91	\$70.12	\$11.32	\$2,227.67	\$2,216.35	\$11.32

to determine the per paycheck deduction, divide the value in the "Employee Contribution" column by 2  
 pay period effective dates: 09/01/2022 - 08/31/2023

**Faculty Monthly Insurance Rates  
October 1, 2022 - September 30, 2023**

<b>Moda Medical Plan 4, Dental Premier Plan 1, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$608.36	\$64.79	\$22.64	\$11.32	\$707.11	\$695.79	\$11.32
<b>EE + Sp/Partner</b>	\$1,338.39	\$128.37	\$49.78	\$11.32	\$1,527.86	\$1,516.54	\$11.32
<b>EE + Child(ren)</b>	\$1,155.89	\$142.74	\$42.95	\$11.32	\$1,352.90	\$1,341.58	\$11.32
<b>Full Family</b>	\$1,885.94	\$211.39	\$70.12	\$11.32	\$2,178.77	\$2,167.45	\$11.32

<b>Moda Medical Plan 4, Dental Premier Plan 5, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$608.36	\$57.23	\$22.64	\$11.32	\$699.55	\$688.23	\$11.32
<b>EE + Sp/Partner</b>	\$1,338.39	\$113.37	\$49.78	\$11.32	\$1,512.86	\$1,501.54	\$11.32
<b>EE + Child(ren)</b>	\$1,155.89	\$126.08	\$42.95	\$11.32	\$1,336.24	\$1,324.92	\$11.32
<b>Full Family</b>	\$1,885.94	\$186.71	\$70.12	\$11.32	\$2,154.09	\$2,142.77	\$11.32

<b>Moda Medical Plan 4, Dental Premier Plan 6, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$608.36	\$43.70	\$22.64	\$11.32	\$686.02	\$674.70	\$11.32
<b>EE + Sp/Partner</b>	\$1,338.39	\$86.50	\$49.78	\$11.32	\$1,485.99	\$1,474.67	\$11.32
<b>EE + Child(ren)</b>	\$1,155.89	\$87.81	\$42.95	\$11.32	\$1,297.97	\$1,286.65	\$11.32
<b>Full Family</b>	\$1,885.94	\$134.14	\$70.12	\$11.32	\$2,101.52	\$2,090.20	\$11.32

<b>Moda Medical Plan 4, Willamette Dental, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$608.36	\$46.60	\$22.64	\$11.32	\$688.92	\$677.60	\$11.32
<b>EE + Sp/Partner</b>	\$1,338.39	\$93.20	\$49.78	\$11.32	\$1,492.69	\$1,481.37	\$11.32
<b>EE + Child(ren)</b>	\$1,155.89	\$99.27	\$42.95	\$11.32	\$1,309.43	\$1,298.11	\$11.32
<b>Full Family</b>	\$1,885.94	\$148.91	\$70.12	\$11.32	\$2,116.29	\$2,104.97	\$11.32

to determine the per paycheck deduction, divide the value in the "Employee Contribution" column by 2  
pay period effective dates: 09/01/2022 - 08/31/2023

**Faculty Monthly Insurance Rates  
October 1, 2022 - September 30, 2023**

<b>Moda Medical Plan 5, Dental Premier Plan 1, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$561.97	\$64.79	\$22.64	\$11.32	\$660.72	\$649.40	\$11.32
<b>EE + Sp/Partner</b>	\$1,236.34	\$128.37	\$49.78	\$11.32	\$1,425.81	\$1,414.49	\$11.32
<b>EE + Child(ren)</b>	\$1,067.77	\$142.74	\$42.95	\$11.32	\$1,264.78	\$1,253.46	\$11.32
<b>Full Family</b>	\$1,742.16	\$211.39	\$70.12	\$11.32	\$2,034.99	\$2,023.67	\$11.32

<b>Moda Medical Plan 5, Dental Premier Plan 5, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$561.97	\$57.23	\$22.64	\$11.32	\$653.16	\$641.84	\$11.32
<b>EE + Sp/Partner</b>	\$1,236.34	\$113.37	\$49.78	\$11.32	\$1,410.81	\$1,399.49	\$11.32
<b>EE + Child(ren)</b>	\$1,067.77	\$126.08	\$42.95	\$11.32	\$1,248.12	\$1,236.80	\$11.32
<b>Full Family</b>	\$1,742.16	\$186.71	\$70.12	\$11.32	\$2,010.31	\$1,998.99	\$11.32

<b>Moda Medical Plan 5, Dental Premier Plan 6, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$561.97	\$43.70	\$22.64	\$11.32	\$639.63	\$628.31	\$11.32
<b>EE + Sp/Partner</b>	\$1,236.34	\$86.50	\$49.78	\$11.32	\$1,383.94	\$1,372.62	\$11.32
<b>EE + Child(ren)</b>	\$1,067.77	\$87.81	\$42.95	\$11.32	\$1,209.85	\$1,198.53	\$11.32
<b>Full Family</b>	\$1,742.16	\$134.14	\$70.12	\$11.32	\$1,957.74	\$1,946.42	\$11.32

<b>Moda Medical Plan 5, Willamette Dental, Opal Vision</b>							
	<b>Medical</b>	<b>Dental</b>	<b>Vision</b>	<b>Supp Ins</b>	<b>Total</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
<b>EE Only</b>	\$561.97	\$46.60	\$22.64	\$11.32	\$642.53	\$631.21	\$11.32
<b>EE + Sp/Partner</b>	\$1,236.34	\$93.20	\$49.78	\$11.32	\$1,390.64	\$1,379.32	\$11.32
<b>EE + Child(ren)</b>	\$1,067.77	\$99.27	\$42.95	\$11.32	\$1,221.31	\$1,209.99	\$11.32
<b>Full Family</b>	\$1,742.16	\$148.91	\$70.12	\$11.32	\$1,972.51	\$1,961.19	\$11.32

to determine the per paycheck deduction, divide the value in the "Employee Contribution" column by 2  
pay period effective dates: 09/01/2022 - 08/31/2023