

City of Gresham
GPOA*, General Unit, IAFF, and MSC Employee Groups
Medical & Dental Insurance Rates .55 FTE (22-23 hours)
July 1, 2020 - June 30, 2021

		Medical			
		City Cost	EE Cost	Total	
<u>City of Gresham Core Plan</u>					<u>Deduction Per Pay Period</u>
	EE Only	438.32	292.20	\$730.52	\$146.10
	EE + 1 Dep.	918.82	612.54	\$1,531.36	\$306.27
	EE + 2 Dep.	1,233.78	822.50	\$2,056.28	\$411.25
<u>Kaiser HMO Plan</u>					
	EE Only	393.98	262.64	\$656.62	\$131.32
	EE + 1 Dep.	810.32	540.20	\$1,350.52	\$270.10
	EE + 2 Dep.	1,098.30	732.18	\$1,830.48	\$366.09
		Dental			
		City Cost	EE Cost	Total	
<u>City of Gresham Base Dental Plan (Moda)</u>					
	EE Only	37.16	\$24.78	\$61.94	\$12.39
	EE + 1 Dep.	76.74	\$51.14	\$127.88	\$25.57
	EE + 2 Dep.	126.68	\$84.44	\$211.12	\$42.22
<u>Kaiser DMO Plan</u>					
	EE Only	37.16	\$36.06	\$73.22	\$18.03
	EE + 1 Dep.	76.74	\$66.02	\$142.76	\$33.01
	EE + 2 Dep.	126.68	\$114.96	\$241.64	\$57.48
<u>Willamette Dental Group</u>					
	EE Only	37.16	\$30.40	\$67.56	\$15.20
	EE + 1 Dep.	69.00	\$46.00	\$115.00	\$23.00
	EE + 2 Dep.	126.68	\$96.32	\$223.00	\$48.16