

City of Gresham
GPOA*, General Unit, IAFF, and MSC Employee Groups
Medical & Dental Insurance Rates .65 FTE (26-27 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	584.42	146.10	\$730.52	\$73.05
	EE + 1 Dep.	1,225.10	306.26	\$1,531.36	\$153.13
	EE + 2 Dep.	1,645.02	411.26	\$2,056.28	\$205.63
<u>Kaiser HMO Plan</u>					
	EE Only	525.30	131.32	\$656.62	\$65.66
	EE + 1 Dep.	1,080.42	270.10	\$1,350.52	\$135.05
	EE + 2 Dep.	1,464.38	366.10	\$1,830.48	\$183.05
		Dental			
		City Cost	EE Cost	Total	
<u>City of Gresham Base Dental Plan (Moda)</u>					
	EE Only	49.56	\$12.38	\$61.94	\$6.19
	EE + 1 Dep.	102.30	\$25.58	\$127.88	\$12.79
	EE + 2 Dep.	168.90	\$42.22	\$211.12	\$21.11
<u>Kaiser DMO Plan</u>					
	EE Only	49.56	\$23.66	\$73.22	\$11.83
	EE + 1 Dep.	102.30	\$40.46	\$142.76	\$20.23
	EE + 2 Dep.	168.90	\$72.74	\$241.64	\$36.37
<u>Willamette Dental Group</u>					
	EE Only	49.56	\$18.00	\$67.56	\$9.00
	EE + 1 Dep.	92.00	\$23.00	\$115.00	\$11.50
	EE + 2 Dep.	168.90	\$54.10	\$223.00	\$27.05