

2009-2010 Rates

Provider	10/1/09-06/30/10		07/01/09-9/30/2009		07/01/08-06/30/09		07/01/07-06/30/08	
	Actual month rate	Subsidized rate to dept.	Actual month rate	Subsidized rate to dept.	Actual month rate	Subsidized rate to dept.	Actual month rate	Subsidized rate to dept.
<b>Kaiser +Vision +EAP</b>	\$868.53	\$810.00	\$860.53	\$810.00	\$771.75	\$790.00	\$704.84	
<b>Provi/Vis/EAP</b>	\$903.83	\$810.00	\$894.90	\$810.00	\$855.76	\$790.00	\$781.82	
<b>ODS Dental</b>	\$107.21	\$100.00	\$107.21	\$100.00	\$103.30	\$98.00	\$99.81	
<b>Willamette</b>	\$94.10	\$100.00	\$94.10	\$100.00	\$87.00	\$98.00	\$32.22 / \$64.44 / \$117.66	
<p>Vision and EAP cost are included under medical cost for costing purposes. For comparison sake, actual Vision and EAP rates have been added to the Kaiser and Providence rate.</p>								
<b>Kaiser</b>	\$858.16		\$850.16		\$771.75		\$704.84	
<b>Providence</b>	\$893.46		\$884.53		\$855.76		\$781.82	
<b>ODS Vision</b>	\$7.95		\$7.95		\$7.95		\$7.95	
<b>ODS Dental</b>	\$107.21	\$100.00	\$107.21	\$100.00	\$103.30	\$98.00	\$99.81	
<b>Willamette</b>	\$94.10	\$100.00	\$94.10	\$100.00	\$87.00	\$98.00	\$32.22 / \$64.44 / \$117.66	
<b>EAP</b>	\$2.42		\$2.42			\$2.42		