

Washington County
Current and Renewal Rates
Effective: July 1, 2011 through June 30, 2012

Medical/Rx - Providence

		<u>CURRENT</u>	<u>RENEWAL</u>	<u>PLAN CHANGE DESCRIPTION</u>
Composite	1259	\$988.23	\$1,085.86	Non-grandfathered status
Employee Only		\$450.34	\$486.95	ER Copay from \$125 to \$250
Employee/One		\$899.90	\$973.47	Urgent Care from \$25 to match OV copay
Employee/Family		\$1,349.86	\$1,460.00	with coinsurance on ancillary services

Monthly Premium:		\$1,244,182	\$1,367,098	
Annual Premium:	1259	\$14,930,179	\$16,405,173	9.9%

Medical/Rx - Kaiser

			<u>RENEWAL</u>	<u>OPTION #1 PLAN CHANGE</u>
Composite	453	\$921.21	\$1,090.50	\$1,047.12 Change from Rx
Employee Only		\$414.87	\$489.66	TBD \$10/\$20 to \$15/\$30
Employee/One		\$829.73	\$979.31	TBD
Employee/Family		\$1,244.60	\$1,468.97	TBD
			Non-grandfathered	Non-grandfathered

Monthly Premium:		\$417,308	\$493,997	\$474,345
Annual Premium:	453	\$5,007,698	\$5,927,958	\$5,692,144
			18.4%	13.7%

Dental - ODS

Composite	1248	\$111.99	\$117.23
Employee Only		\$53.44	\$55.94
Employee/One		\$97.82	\$102.40
Employee/Family		\$147.53	\$154.43

Monthly Premium:		\$139,764	\$146,303
Annual Premium:	1248	\$1,677,162	\$1,755,636
			4.7%

Dental - Willamette

Composite	475	\$93.80	\$93.80
Employee Only		\$43.45	\$43.45
Employee/One		\$78.70	\$78.70
Employee/Family		\$137.30	\$137.30

Monthly Premium:		\$44,555	\$44,555
Annual Premium:	475	\$534,660	\$534,660
			0.0%

Vision - ODS

Composite	1808	\$7.95	\$8.57
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Monthly Premium:		\$14,374	\$15,495
Annual Premium:	1808	\$172,483	\$185,935
			7.8%

Annual Premium		\$22,322,182	\$24,809,362	\$24,573,548
			11.1%	10.1%