

2023 rates

2023 Employee Medical Plan Monthly Premium Rates

	Employee	Employee and spouse/ partner	Employee and children	Employee and family
Kaiser Traditional ¹	\$879.90	\$1,759.80	\$1,495.83	\$2,375.74
Kaiser Deductible ¹	\$807.70	\$1,615.40	\$1,373.09	\$2,180.79
Moda Synergy ²	\$827.06	\$1,654.12	\$1,405.99	\$2,233.07
Providence Statewide ³	\$929.03	\$1,858.07	\$1,579.35	\$2,508.39
Providence Choice ⁴	\$810.75	\$1,621.49	\$1,378.27	\$2,189.02
Kaiser Traditional Part-Time ⁵	\$742.10	\$1,484.19	\$1,261.54	\$2,003.65
Kaiser Deductible Part-Time ⁵	\$663.54	\$1,327.09	\$1,128.02	\$1,791.59
Moda Synergy Part-Time ⁶	\$673.34	\$1,346.67	\$1,144.69	\$1,818.03
Providence Statewide Part-time ⁷	\$754.70	\$1,509.42	\$1,282.99	\$2,037.70
Providence Choice Part-time ⁸	\$657.02	\$1,314.01	\$1,116.92	\$1,773.93

¹ Available to PEBB eligible full-time and part-time employees in plan service area. Kaiser routine vision services.

² Available to PEBB eligible full-time and part-time employees in plan service area.

³ Available to PEBB eligible full-time and part-time employees.

⁴ Available to PEBB eligible full-time and part-time employees in plan service area.

⁵ Additional option available to eligible part-time employees in plan service area. Vision exam only.

⁶ Additional option available to eligible part-time employees in plan service area.

⁷ Additional option available to eligible part-time employees.

⁸ Additional option available to eligible part-time employees in plan service area. Vision exam only.

2023 Employee vision plan monthly premium rates

	Employee	Employee and spouse/ partner	Employee and children	Employee and family
VSP	\$8.36	\$16.73	\$14.23	\$22.58
VSP Plus	\$15.56	\$31.14	\$26.46	\$42.02

2023 Employee dental plan monthly premium rates

	Employee	Employee and spouse/ partner	Employee and children	Employee and family
Kaiser Permanente ¹	\$65.27	\$130.54	\$110.97	\$176.24
Delta Dental Premier ²	\$62.31	\$124.59	\$105.90	\$168.21
Delta Dental PPO ³	\$57.57	\$115.12	\$97.87	\$155.43
Willamette Dental Group ⁴	\$55.16	\$110.33	\$93.84	\$149.00
Delta Dental ⁵	\$44.83	\$89.67	\$76.22	\$121.05
Kaiser Permanente Part-time ⁶	\$48.67	\$97.35	\$82.76	\$131.43

¹ Available to PEBB eligible full-time and part-time employees in plan service area.

² Available to PEBB eligible full-time and part-time employees.

³ Available to PEBB eligible full-time and part-time employees.

⁴ Available to PEBB eligible full-time and part-time employees in plan facilities.

⁵ Additional option available to eligible part-time employees; in plan facilities.

⁶ Additional option available to eligible part-time employees; in plan service area.

Note: All rates include 0.4% commission and 0.75% PEBB administration cost.