

West Inn-Wilsonville School District #3J
Admin/Confidential Insurance Deductions 2019-20

Medical Insurance

	Employer	Employee	Premium
Health Net PPO*			
Employee Only	\$847.23	\$0.00	\$847.23
Employee and Spouse	\$1,779.41	\$0.00	\$1,779.41
Employee and Child(ren)	\$1,609.75	\$0.00	\$1,609.75
Employee and Family	\$2,372.26	\$0.00	\$2,372.26
Health Net EPO (HMO)*			
Composite	\$1,973.41	\$0.00	\$1,973.41
Health Net HDHP*			
Composite	\$1,106.85	\$0.00	\$1,106.85
Kaiser EPO (HMO)*			
Composite	\$1,457.40	\$0.00	\$1,457.40

Dental Insurance

	Employer	Employee	Premium
Ameritas			
Composite	\$147.20	\$0.00	\$147.20
Willamette			
Composite	\$115.75	\$0.00	\$115.75

If you have any questions, please contact:

Payroll & Benefits

PR-Ben@wlwv.k12.or.us