

**Pendleton School District 16R - Certified/Confidential Insurance Options**  
**October 1, 2024 - September 30, 2025**

Plan Options	Medical	Dental			Vision	Total Cost of Plan	District Pays	Out of Pocket	District HRA Contribution
		Premier Plan 5 w Ortho	Premier Plan 6	Willamette 8 with Ortho					
<b>MODA Medical Plan 2</b>					<b>MODA Pearl</b>				
<b>MEDICAL PLAN 2 W/ PHARMACY OPTIONS</b>									
Plan 2 + Dental 5 + Pearl	1,751.51	145.08			40.71	1,937.30	1,850.00	87.30	-
Plan 2 + Dental 6 + Pearl	1,751.51		104.70		40.71	1,896.92	1,850.00	46.92	-
Plan 2 + Dental 8 + Pearl	1,751.51			120.55	40.71	1,912.77	1,850.00	62.77	-
Plan 2 + Dental 5	1,751.51	145.08				1,896.59	1,850.00	46.59	-
Plan 2 + Dental 6	1,751.51		104.70			1,856.21	1,850.00	6.21	-
Plan 2 + Dental 8	1,751.51			120.55		1,872.06	1,850.00	22.06	-
Plan 2 + Pearl	1,751.51				40.71	1,792.22	1,850.00	-	57.78
Plan 2 Only	1,751.51					1,751.51	1,850.00	-	98.49

Plan Options	Medical	Dental			Vision	Total Cost of Plan	District Pays	Out of Pocket	District HRA Contribution
		Premier Plan 5 w Ortho	Premier Plan 6	Willamette 8 with Ortho					
<b>MODA Medical Plan 3</b>					<b>MODA Pearl</b>				
<b>MEDICAL PLAN 3 W/ PHARMACY OPTIONS</b>									
Plan 3 + Dental 5 + Pearl	1,643.24	145.08			40.71	1,829.03	1,850.00	-	20.97
Plan 3 + Dental 6 + Pearl	1,643.24		104.70		40.71	1,788.65	1,850.00	-	61.35
Plan 3 + Dental 8 + Pearl	1,643.24			120.55	40.71	1,804.50	1,850.00	-	45.50
Plan 3 + Dental 5	1,643.24	145.08				1,788.32	1,850.00	-	61.68
Plan 3 + Dental 6	1,643.24		104.70			1,747.94	1,850.00	-	102.06
Plan 3 + Dental 8	1,643.24			120.55		1,763.79	1,850.00	-	86.21
Plan 3 + Pearl	1,643.24				40.71	1,683.95	1,850.00	-	166.05
Plan 3 Only	1,643.24					1,643.24	1,850.00	-	206.76

Plan Options	Medical	Dental			Vision	Total Cost of Plan	District Pays	Out of Pocket	District HRA Contribution
		Premier Plan 5 w Ortho	Premier Plan 6	Willamette 8 with Ortho					
<b>MODA Medical Plan 4</b>					<b>MODA Pearl</b>				
<b>MEDICAL PLAN 4 W/ PHARMACY OPTIONS</b>									
Plan 4 + Dental 5 + Pearl	1,551.61	145.08			40.71	1,737.40	1,850.00	-	112.60
Plan 4 + Dental 6 + Pearl	1,551.61		104.70		40.71	1,697.02	1,850.00	-	152.98
Plan 4 + Dental 8 + Pearl	1,551.61			120.55	40.71	1,712.87	1,850.00	-	137.13
Plan 4 + Dental 5	1,551.61	145.08				1,696.69	1,850.00	-	153.31
Plan 4 + Dental 6	1,551.61		104.70			1,656.31	1,850.00	-	193.69
Plan 4 + Dental 8	1,551.61			120.55		1,672.16	1,850.00	-	177.84
Plan 4 + Pearl	1,551.61				40.71	1,592.32	1,850.00	-	257.68
Plan 4 Only	1,551.61					1,551.61	1,850.00	-	298.39

Plan Options	Medical	Dental			Vision	Total Cost of Plan	District Pays	Out of Pocket	District HSA Contribution *Subject to IRS Annual Limits
		Premier Plan 5 w Ortho	Premier Plan 6	Willamette 8 with Ortho					
<b>MODA Medical Plan 6</b>					<b>MODA Pearl</b>				
<b>MEDICAL PLAN 6</b>									
Plan 6 + Dental 5 + Pearl	1,462.01	145.08			40.71	1,647.80	1,850.00	-	202.20
Plan 6 + Dental 6 + Pearl	1,462.01		104.70		40.71	1,607.42	1,850.00	-	242.58
Plan 6 + Dental 8 + Pearl	1,462.01			120.55	40.71	1,623.27	1,850.00	-	226.73
Plan 6 + Dental 5	1,462.01	145.08				1,607.09	1,850.00	-	242.91
Plan 6 + Dental 6	1,462.01		104.70			1,566.71	1,850.00	-	283.29
Plan 6 + Dental 8	1,462.01			120.55		1,582.56	1,850.00	-	267.44
Plan 6 + Pearl	1,462.01				40.71	1,502.72	1,850.00	-	347.28
Plan 6 Only	1,462.01					1,462.01	1,850.00	-	387.99