PCC Health Insurance Cost Sheet - Part-Time Faculty*

October 1, 2023, to September 30, 2024

Please see SB 551 cost sheet for more information on the SB 551 subsidy for employee only medical, vision and dental.

Under the Faculty and Academic Professional Agreement, the following Premiums and Caps apply for eligible parttime faculty members who qualify. The Cap applies to medical and vision only and is based on your medical tier of enrollment. See the contract for eligibility criteria.

At the time of printing, the Cap amount has not been determined by the current collective bargaining process. Until the agreements are final, the College will continue to make the current Cap contribution. The new Cap amount, as well as any other negotiated changes, will be communicated as soon as the agreements are finalized.

- \$502 for self only medical, or if enrolling in vision only
- \$652 for self plus spouse/domestic partner (DP)
- \$652 for self plus child(ren)
- \$802 for self plus family (includes spouse/DP and children)

Monthly Premiums

Medical Plans	Self Only	Self + Spouse/DP	Self + Child(ren)	Self + Spouse/DP + Child(ren)
Kaiser Plan 1	\$693.73	\$1,526.21	\$1,318.09	\$2,150.57
Kaiser Plan 2B	\$556.61	\$1,225.32	\$1,057.50	\$1,726.32
Kaiser Plan 3 (HSA eligible)	\$423.09	\$931.34	\$803.53	\$1,311.82
Moda Plan 2	\$711.74	\$1,565.82	\$1,352.33	\$2,206.43
Moda Plan 3	\$667.73	\$1,469.01	\$1,268.73	\$2,070.02
Moda Plan 6 (HSA eligible)	\$594.09	\$1,307.01	\$1,128.81	\$1,841.73
Vision Plans				
Kaiser	\$8.49	\$18.67	\$16.12	\$26.31
Moda Quartz	\$12.67	\$27.92	\$24.09	\$39.28
VSP Choice Plus	\$14.56	\$32.04	\$27.68	\$45.14
Dental Plans				
Kaiser with orthodontia	\$70.88	\$155.96	\$134.69	\$219.74
Delta/Moda Plan 5 with orthodontia	\$57.95	\$114.80	\$127.67	\$189.06
Delta/Moda Plan 6 without orthodontia	\$44.25	\$87.59	\$88.91	\$135.83
Willamette with orthodontia	\$46.99	\$93.99	\$100.11	\$150.18

The worksheet below and the worksheet on the SB 551 cost sheet will help you determine your premium costs and give you a better picture of how the SB 551 Subsidy compares to the PCC Cap.

To determine your costs with the PCC Cap, please complete the worksheets below. Use the SB 551 worksheet to determine your costs with the SB 551 subsidy.

Your Premium Costs with the PCC Cap

Any cost over the amount paid by the College is your responsibility to pay and will be deducted from your paychecks* on a pre-tax basis. See the Part-time Faculty Payment Instructions sheet for additional details.

Medical Premium		
Vision Premium	+	
PCC Cap	-	
Sub Total (enter zero if negative number)	=	
Dental Premium	+	
Your share of the monthly premiums	=	
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Bi-weekly payroll deduction**	=	

^{*} For part-time faculty who qualify under the PCC Faculty and Academic Professional contract criteria.

See the Part-time Faculty Payment Instructions for additional details, including the payroll deduction schedule and information on what happens if you do not have a paycheck from which to deduct your portion of the premiums.

^{**}PCC will bill you under the Paying for College tab of MyPCC if you are not working one term (bridge term). Your insurance will be cancelled if you fail to pay your portion of premiums in a timely manner.