



**Parole and Probation Officers (FOPPO)**  
**Full Time Employee Health Care Premium Costs**  
 January 1, 2021 - December 31, 2021

Coverage	Employee Cost Per Paycheck	Employee Monthly Cost	Monthly County Contribution	Total Monthly Premium
<b>Medical - Moda Performance Plan</b>				
Employee Only	\$46.05	\$92.10	\$828.86	\$920.96
Employee + 1 Dependent	\$92.09	\$184.18	\$1,657.70	\$1,841.88
Employee + 2 or more Dependents	\$131.15	\$262.30	\$2,360.70	\$2,623.00
<b>Medical - Moda Preferred Plan</b>				
Employee Only	\$20.23	\$40.46	\$768.70	\$809.16
Employee + 1 Dependent	\$40.46	\$80.92	\$1,537.40	\$1,618.32
Employee + 2 or more Dependents	\$57.61	\$115.22	\$2,189.18	\$2,304.40
<b>Medical - Moda Major Medical Plan</b>				
Employee Only	\$0.00	\$0.00	\$411.76	\$411.76
Employee + 1 Dependent	\$0.00	\$0.00	\$823.48	\$823.48
Employee + 2 or more Dependents	\$0.00	\$0.00	\$1,173.44	\$1,173.44
<b>Medical - Kaiser Plan</b>				
Employee Only	\$20.12	\$40.24	\$764.44	\$804.68
Employee + 1 Dependent	\$40.19	\$80.38	\$1,527.14	\$1,607.52
Employee + 2 or more Dependents	\$57.28	\$114.56	\$2,176.60	\$2,291.16
<b>Delta Dental Plan</b>				
Employee Only	\$1.35	\$2.70	\$51.26	\$53.96
Employee + 1 Dependent	\$2.70	\$5.40	\$102.52	\$107.92
Employee + 2 or more Dependents	\$3.84	\$7.68	\$145.88	\$153.56
<b>Kaiser Dental Plan</b>				
Employee Only	\$2.25	\$4.50	\$85.40	\$89.90
Employee + 1 Dependent	\$4.49	\$8.98	\$170.84	\$179.82
Employee + 2 or more Dependents	\$6.40	\$12.80	\$243.44	\$256.24
<b>Willamette Dental Plan</b>				
Employee Only	\$1.60	\$3.20	\$60.90	\$64.10
Employee + 1 Dependent	\$3.20	\$6.40	\$121.80	\$128.20
Employee + 2 or more Dependents	\$4.56	\$9.12	\$173.64	\$182.76

**Qualifying Dependents:** Spouse, Domestic Partner, and Children and Domestic Partner's Children under the age of 26.

[Employees who enroll their Domestic Partner and/or Domestic Partner's children are required to pay tax on the value of those dependents' health plan coverage according to IRS rules.](#)

**Parole and Probation Officers (FOPPO)  
Part Time Employee Health Care Premium Costs**

January 1, 2021 - December 31, 2021

Coverage	Employee Cost Per Paycheck	Employee Monthly Cost	Monthly County Contribution	Total Monthly Premium
<b>Medical - Moda Performance Plan</b>				
Employee Only	\$253.26	\$506.52	\$414.44	\$920.96
Employee + 1 Dependent	\$506.52	\$1,013.04	\$828.84	\$1,841.88
Employee + 2 or more Dependents	\$721.33	\$1,442.66	\$1,180.34	\$2,623.00
<b>Medical - Moda Preferred Plan</b>				
Employee Only	\$161.83	\$323.66	\$485.50	\$809.16
Employee + 1 Dependent	\$356.03	\$712.06	\$906.26	\$1,618.32
Employee + 2 or more Dependents	\$530.01	\$1,060.02	\$1,244.38	\$2,304.40
<b>Medical - Moda Major Medical Plan</b>				
Employee Only	\$0.00	\$0.00	\$411.76	\$411.76
Employee + 1 Dependent	\$0.00	\$0.00	\$823.48	\$823.48
Employee + 2 or more Dependents	\$0.00	\$0.00	\$1,173.44	\$1,173.44
<b>Medical - Kaiser Plan</b>				
Employee Only	\$120.70	\$241.40	\$563.28	\$804.68
Employee + 1 Dependent	\$289.35	\$578.70	\$1,028.82	\$1,607.52
Employee + 2 or more Dependents	\$423.86	\$847.72	\$1,443.44	\$2,291.16
<b>Medical - Kaiser Maintenance Plan</b>				
Employee Only	\$31.45	\$62.90	\$566.14	\$629.04
Employee + 1 Dependent	\$62.90	\$125.80	\$1,132.24	\$1,258.04
Employee + 2 or more Dependents	\$89.64	\$179.28	\$1,613.48	\$1,792.76
<b>Delta Dental Plan</b>				
Employee Only	\$13.49	\$26.98	\$26.98	\$53.96
Employee + 1 Dependent	\$26.98	\$53.96	\$53.96	\$107.92
Employee + 2 or more Dependents	\$38.39	\$76.78	\$76.78	\$153.56
<b>Kaiser Dental Plan</b>				
Employee Only	\$22.47	\$44.94	\$44.96	\$89.90
Employee + 1 Dependent	\$44.95	\$89.90	\$89.92	\$179.82
Employee + 2 or more Dependents	\$64.06	\$128.12	\$128.12	\$256.24
<b>Willamette Dental Plan</b>				
Employee Only	\$16.02	\$32.04	\$32.06	\$64.10
Employee + 1 Dependent	\$32.05	\$64.10	\$64.10	\$128.20
Employee + 2 or more Dependents	\$45.69	\$91.38	\$91.38	\$182.76

**Qualifying Dependents:** Spouse, Domestic Partner, and Children and Domestic Partner's Children under the age of 26.

[Employees who enroll their Domestic Partner and/or Domestic Partner's children are required to pay tax on the value of those dependents' health plan coverage according to IRS rules.](#)